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ABSTRACT

The 1983-84 directory presents synopses and descriptions of Handicapped Children's Early Education Program (HCEEP) projects. An initial chapter reviews the background of HCEEP and reviews a 1982 study of the impact of HCEEP. The overview section presents information gathered from 1983-84 surveys on the type of activities pursued by the five types of HCEEP projects: (1) demonstration projects; (2) outreach projects; (3) state implementation grants; (4) early childhood research institutes; and (5) technical assistance. The main segment of the directory presents abstracts on 164 HCEEP projects. Abstracts include identifying information as well as information on fiscal agency, administrators, staff titles, target population characteristics, program for children and parents, measures of child progress, and features and products. A project list and topic index conclude the directory. (CL)

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Directory
1983-84 edition

Produced for the
Office of Special Education Programs
U.S. Department of Education

Edited by Daniel Assael

U.S. DEPARTMENT OF EDUCATION
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June 1984

TADS

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Preface

This document, produced by the Technical Assistance Development System (TADS) for the Office of Special Education Programs (OSEP) of the U.S. Department of Education, is a directory of projects supported by OSEP grants and contracts in the Handicapped Children's Early Education Program (HCEEP). This document also presents an overview of HCEEP's activities.

The *1983–84 HCEEP Directory* contains five sections:

- The Introduction describes the HCEEP network and the results of a recent evaluation study.
- The Overview section summarizes the activities of the five types of HCEEP projects: demonstration, outreach, and state implementation grant (SIG) projects; early childhood research institutes; and the technical assistance center.
- The Directory section includes project-written abstracts for each of the 164 HCEEP projects.
- The Project List shows all 164 projects and the page number of each project's abstract. These numbers also represent the projects in the Index section.
- The Index provides a guide to projects' pertinent characteristics (handicapping conditions of children, parent activities offered, curricula used, etc.).

This document presents the national effort of the HCEEP network in a manageable perspective for use by those directly or indirectly involved in that effort. Families may look to this book to find out who and what programs can help their children. Service providers may use it to collaborate with other professionals. Lawmakers, administrators, and other policy makers may refer to the book for a comprehensive up-to-date portrait of the diverse activities their decisions may affect. OSEP and TADS hope the *HCEEP Directory* will stimulate interest in the needs of America's young handicapped children and their families and further the aim of HCEEP — to create more and better services for all young handicapped children.

Introduction

by Jane DeWeerd

Early Childhood Task Force
Office of Special Education Programs
U.S. Department of Education

The mandate of the Handicapped Children's Early Education Program (HCEEP) is to support experimental preschool and early childhood programs that "show promise of promoting a comprehensive approach" to the special problems of handicapped children and their families. The 1983–84 program is fulfilling this mandate through these five components:

- The demonstration component supports the development of models for effective services for young children and their families.
- The outreach component provides an opportunity for projects which have completed the three-year demonstration phase, and obtained continuation funding from state and local sources, to respond to requests for assistance in replicating/adapting their models.
- The state implementation grant (SIG) component provides resources for state agencies for the development and implementation of comprehensive statewide plans for early childhood education.
- Technical assistance is provided to demonstration and SIG projects through a technical assistance contract.
- Early childhood research institutes conduct research in areas relevant to early intervention for children from birth to age 6 years.

The history of the program is one of growth and diversification. In 1968, the U.S. Congress held hearings that led to the passage of legislation establishing the Handicapped Children's Early Education Program, sometimes called the "First Chance Network." The hearings pointed to the need for locally designed ways to serve infants, young children, and their families; for more specific information on effective programs and techniques; and for the distribution of visible, replicable models throughout the country.

In the summary and discussion of the provision, the drafters of the original legislation addressed the important need of providing major services to handicapped children at a very early age. Only early intervention with

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tested and successful models, they affirmed, would allow professionals to deliver the best services to handicapped children. Bipartisan support for the legislation was strong, and the committee's intent was clear. The subcommittee emphasized that HCEEP was a model demonstration program and not a service program. In addition, the report asserted that those programs promising meaningful approaches to the education of the handicapped should be eligible for permanent legislative support in the future.

In 1980, the program was included in the Education of the Handicapped Act, P.L. 91-230. In 1983, it was again affirmed during the revision of this legislation, P.L. 98-199. This revised law greatly increases the emphasis upon the role of the states in planning and providing early intervention services, and encouraging collaborations among agencies at all levels of service delivery.

HCEEP began as a small program of 24 demonstration projects. As circumstances in the field changed, HCEEP evolved into an effort with five major, complementary components (see *Figure 1*).

Demonstration

There are presently 82 demonstration projects sponsored by private agencies, universities, local schools, state education agencies, and other organizations. Demonstration projects feature these components: child identification and assessment, educational/therapeutic programming for children, evaluation of child progress, active parent and family participation, in-service training, coordination with public schools and other agencies, evaluation of project objectives, and demonstration and dissemination of project infor-

Figure 1

Handicapped Children's Early Education Program

PURPOSE: To Assist in Developing and Implementing Innovative Experimental Programs for Young Handicapped Children (Birth to Eight Years) and Their Families

PROJECTS	DEMONSTRATION	OUTREACH	STATE IMPLEMENTATION	EC INSTITUTES	TECHNICAL ASSISTANCE
ACTIVITIES	DEVELOPMENT OF EXEMPLARY MODELS SERVICES TO CHILDREN SERVICES TO PARENTS STAFF DEVELOPMENT PROGRAM EVALUATION COORDINATION WITH PUBLIC SCHOOLS DEMONSTRATION AND DISSEMINATION	STIMULATION OF INCREASED AND HIGH QUALITY SERVICES TRAINING CONSULTATION STATE INVOLVEMENT AND COORDINATION DISSEMINATION OF INFORMATION PRODUCT DEVELOPMENT AND DISTRIBUTION	DEVELOPMENT AND IMPLEMENTATION OF EARLY CHILDHOOD STATE PLANS ASSESSMENT OF NEEDS AND RESOURCES TRAINING DATA COLLECTION AND ANALYSIS INTERAGENCY AGREEMENTS DEVELOPMENT OF GUIDELINES, STANDARDS, CERTIFICATION REQUIREMENTS, ETC.	LONG-TERM INVESTIGATION OF SELECTED ASPECTS OF EARLY EDUCATION FOR HANDICAPPED CHILDREN RESEARCH INTO DIRECT APPLICATION OF EARLY EDUCATION PROGRAMS IN TYPICAL SETTINGS	TECHNICAL ASSISTANCE TO DEMONSTRATION PROJECTS, OUTREACH PROJECTS AND STATE IMPLEMENTATION GRANT PROJECTS ASSESSMENT OF NEEDS PROGRAM PLANNING EXPERT CONSULTATION EVALUATION
ELIGIBLE PARTIES	PUBLIC AND PRIVATE NONPROFIT AGENCIES	FORMER DEMONSTRATION GRANTEES MEETING CRITERIA	STATE EDUCATION AGENCIES	PUBLIC AND PRIVATE NONPROFIT AGENCIES	PUBLIC AND PRIVATE NONPROFIT AGENCIES
TYPE OF FUNDING	GRANT	GRANT	GRANT	CONTRACT	CONTRACT
FUNDING PERIOD	3 YEARS ANNUAL RENEWAL	1 YEAR POTENTIAL FOR RENEWAL	2 YEARS RENEWAL	5 YEARS	3 YEARS ANNUAL RENEWAL

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mation. The demonstration projects have cooperated with a wide array of other agencies at the local, state, and regional levels.

The demonstration projects form HCEEP's base. They have a difficult mandate to carry out in a three-year period, but the record shows that nearly all the projects meet, and many surpass, their objectives. The projects have demonstrated that many young children with handicaps are capable of making greater gains during the critical early years than their prognoses had indicated. During 1983–84, several projects are attempting to chart new ground:

- The ERIN Project, Dedham, Massachusetts, is producing screening material in 15 languages for nondiscriminatory testing. The recent influx of immigrants points to the lack of multilingual assessment materials at the preschool level.
- The Clay County Vocational Center of Moorhead, Minnesota, is sponsoring a project which is the result of two years of interagency planning. The schools act in the central role as brokers for services, and parents serve as evaluators.
- The Language and Cognitive Development Center of Jamaica Plain, Massachusetts, deals with severely emotionally disturbed children who manifest compulsive, repetitive behavior. The program's novel theoretical base focuses on Hispanic children living in a low-income area.
- The University of Washington has designed a correspondence course which matches parents with similar circumstances so that the more experienced parents can assist the "newer" parents. The project was designed after letters received by the university (in response to an article in *Family Circle* magazine about another University of Washington program for handicapped children) described a lack of services and a need for specific information.
- The Children's Hospital Center of Oakland, California, is serving high-risk infants in double jeopardy because of the dysfunctional parent/child relationships. The project demonstrates a partnership of health, mental health, and developmental/education agencies at the local level.
- The University of Kansas, the local public school, and the Kansas state education agency are planning a system to manage individual education plans. The system will use microcomputer technology to increase the efficiency of service delivery in rural areas. The project will develop a validated curriculum package for a broad range of handicapped infants and preschoolers.
- The South Shore Mental Health Center of Quincy, Massachusetts, is demonstrating home- and prison-based services for children of drug-addicted or alcoholic parents who are incarcerated. The project will work with all the appropriate agencies to coordinate services and improve identification and educational/therapeutic programming for this neglected and growing group.
- The San Diego State University Foundation of San Diego, California, uses a computerized index of resources and services to provide educational intervention and parent services for at-risk handicapped babies from birth to age 3 years. Materials are available in Spanish, Vietnamese, and Cambodian to serve the diverse population, which includes immigrants, refugees, migrant workers, and transient military families. Coordination among local agencies has been assured with the development of working collaborative agreements.

Outreach

HCEEP's outreach component was developed in 1972. During the 1983–1984 funding year, HCEEP supports 53 outreach projects working to meet two goals: to stimulate the development of high-quality services and to develop models for outreach activities.

The major focus of outreach projects is to stimulate new or improved services and to train staff of agencies requesting assistance. Awareness activities inform decision makers of the importance, effectiveness, and the features of the early intervention model developed during the demonstration phase. Product development and distribution and involvement with state agencies concerned with providing services to young children are other frequent activities. Current audiences for outreach efforts include public schools, private nonprofit agencies, state education agencies, Head Start, mental health and mental retardation agencies, day-care programs, Indian tribes, nursery schools, medical programs, health departments, and universities.

The variety and range of outreach activities are illustrated by these examples of current work:

- The University of Idaho's outreach effort includes replication of a cost-efficiency component.
- Vanderbilt University is computerizing data to provide rural areas with early access to assistance in initiating or improving preschool services.
- The Chapel Hill, North Carolina, outreach project helped the Kentucky State Education Agency (SEA) include children with handicaps in kindergartens that were initiated in all 180 Kentucky school districts. The outreach project is now working with the Louisiana and Florida SEAs at their request.
- The DEBT Project, developed by the Lubbock (Texas) Public Schools, is assisting special education and Head Start personnel in local and state agencies, mental health/mental retardation centers, and other related agencies to use their JDRP-approved model. The model has strong community support and the Lubbock Public Schools have established an Early Childhood Department based on the DEBT Project to augment their Head Start and Special Education Departments. The Department of Pediatrics of Texas Tech University and the project co-sponsor conferences and training for educational and medical personnel.
- The outreach project sponsored by the University of California at Los Angeles helps other agencies to provide coordinated interdisciplinary services featuring individualized parent involvement and integration of handicapped and nonhandicapped infants and toddlers. The Los Angeles County Schools are receiving in-service training workshops for school nurses. Pediatric personnel are being trained in child development, assessment, and communication with parents.
- The Pediatric Education Project at Ohio State University's medical school provides pediatric residents with a one-month rotation in the care and treatment of handicapped children.

State Implementation Grants

The state implementation grant (SIG) component began in 1976. This component was designed to help state education agencies build their capacity to plan for the development and expansion of early intervention services for handicapped children. SIGs help states develop long-term, comprehensive, full-service plans for preschool education of the handicapped. SIGs can help states by making available trained personnel who have the time to devote to needs and resource assessment, detailed planning, and state-level coordination of services among agencies. Twenty-five SIGs are funded in 1983–84.

- The New Jersey SIG is implementing a comprehensive plan for services for the birth-to-3 age group. The plan became mandatory in September of 1982. The materials and procedure being developed and used complement the SIG's previous work for children aged 3 to 5.
- The Wisconsin SIG is designing a state-coordinated technical assistance system to aid those working with infants and toddlers from birth to age 2 years. Through this system, materials and personnel resources within the state will be identified and made accessible in a resource bank.
- The Maine SIG is expanding services for the 3-to-5 age group and planning with other health, education, and social service agencies for future services for the birth-to-2 group. Maine is developing a model for states with legislation requiring collaborative planning.
- The Colorado SIG is emphasizing parent training and networking and the development of local-level interagency collaboration. Efficacy continues to be a focus.

Various levels of funding are offered for SIG projects because of the wide diversity among states with respect to legislative mandates, appropriation levels, percentages of young children served, experience with preschool and early intervention, interagency coordination, and resources. Since the goal of the SIG program is to accelerate progress toward the provision of effective full services and to provide an incentive for that acceleration, higher funding levels are provided for states which have progressed farthest along the continuum of comprehensive planning and services.

P.L. 98-199 specifies that an Early Childhood State Plan Program will award grants to state education agencies or other appropriate state agencies to plan, develop, and implement a comprehensive delivery system for the provision of special education and related services to handicapped children from birth to age 5 years. Only one grant is awarded to each state.

- States in the planning stage may be funded for a maximum of two years to assess needs and put together procedures and designs for the development of a state plan which includes parent participation and training of professionals and others.
- Following this phase, a development grant is available for a maximum of three years to develop a comprehensive state plan and obtain approval from the state's board of education, commissioner of education, or other designated officials of the appropriate state agency.
- An implementation grant is available to a state which has completed the development phase and obtained state agency approval of its plan. An implementation grant provides support for up to three years to implement and evaluate the plan.

At least 30 percent of the appropriation for HCEEP is to be used for the state implementation component. A noteworthy feature is that at least 10 percent of the amount to be available for the state implementation component is to be used for training and technical assistance. The passage of this legislation recognizes the key role of states in providing education for its youngest citizens and it makes available the opportunity to carry out sustained effort for a maximum of eight years.

Early Childhood Research Institutes

The early childhood research institutes are a joint effort of the Office of Special Education Programs (OSEP), and OSEP's Research Projects Section. Three institutes began work in 1982 with a five-year project period for longitudinal investigation of research areas relevant to early intervention for children from birth to age 6 years. The three institutes are concerned with programming for autistic-like children, with cost and efficacy data, and with programming for families.

Technical Assistance

Technical Assistance is an important component within HCEEP. The Technical Assistance Development System (TADS) works with demonstration projects to develop quality programming by helping projects meet their objectives and needs. Since 1971, TADS has pioneered procedures for the systematic delivery of technical assistance and is active in information dissemination. In addition, TADS works with state education agencies and maintains liaison with the three HCEEP early childhood research institutes. Though their workscope has been expanded to include other programs within OSEP, TADS provides technical assistance only to HCEEP projects. Design, development, and evaluation of technical assistance for early childhood education by TADS has been a key factor in the success of the HCEEP program and represents a unique national resource.

Impact Data

The most extensive information on the impact of the HCEEP projects over the ten-year period from 1969 (when the first 24 projects were funded) through 1979–80, became available in 1982 with the completion of the "Analysis of the Impact of HCEEP" conducted by Roy Littlejohn Associates, Inc., under contract with the U.S. Department of Education. Surveys and site visits were used to obtain data on the impact of the 280 projects that had completed the three-year period of demonstration prior to 1981; some of these projects also carried out outreach activities in response to requests from other agencies.

The objectives of this impact study were to:

- Determine the extent of a) continuation of projects with non-HCEEP funds after the three years of federal support for demonstration, b) replication of models developed by the program, and c) placement of children graduating from the projects;
- Analyze factors affecting each project's impact;
- Collect descriptive and analytical information on exemplary projects having the greatest impact:

Almost all the projects that met the criteria for inclusion in the study were reached by mail or telephone. Twenty site visits were made to randomly selected projects to determine whether the services reported in continuation and replication sites were fundamentally like the model described in the abstracts of the original demonstration projects; it was determined that they were.

Information on the placement of children leaving the program was obtained from projects that kept this type of record.

Roy Littlejohn Associates, Inc., attempted to determine HCEEP's impact as a catalyst for the development and dissemination of increased and improved services for young children and their families. The study found that the accomplishments of the HCEEP projects as shown by the survey results are greater and more varied than for any other documented education program they have been able to identify, and that the program paid for itself many times over. Specifically:

- Eighty percent of the 280 projects continue — independent of HCEEP funding — to serve children.
- More than 30,200 children have been served in continuation projects at no cost to HCEEP.
- HCEEP projects stimulated 2,157 replications — 1,991 by outreach projects and 166 by projects in the demonstration phase.
- For every programming dollar spent by HCEEP, $18.37 was generated for programming for children and their families.
- Replication programs served 107,850 children.
- For each child served directly by demonstration projects, 6.4 children received services through continuation of demonstration projects and through replication of projects.
- For each demonstration project, an average of 33 children per year were served with other funds.
- Projects have been active in urban and rural areas in every state and in several U.S. territories, as specified by the legislation.
- Sixty-seven percent of the children who left HCEEP demonstration projects were placed in integrated settings with nonhandicapped children (less expensive than more specialized placements).
- Twenty-two HCEEP projects have been approved for dissemination by the the U.S. Department of Education's Joint Dissemination and Review Panel on the basis of evidence of effective programming and cost of replication.
- HCEEP projects developed and disseminated more than 3,000 different print and audiovisual products; many products were purchased by commercial publishers.
- Extensive training has been requested by and provided to personnel of other agencies.
- Many foreign countries have adopted models developed by the HCEEP programs.

Materials developed by the projects have been widely used. The Chapel Hill (North Carolina) outreach project developed the Learning Accomplishment Profile (LAP), which has become the most widely used assessment instrument in the Head Start program. Some of the projects with common concerns and interests have formed consortia, in part to increase the effectiveness of their dissemination. One group of projects, the Rural Network, developed a series of monographs providing information on 11 topics (including transportation and coordination between health care and education) of special concern to programs located in rural areas. INTERACT, a consortium of projects serving children from birth to age 3 years, developed its second monograph in 1982, *Basic Competencies for Personnel in Early Intervention Programs: Guidelines for Development.*

TADS, the technical assistance agency, has produced numerous monographs, series papers, and proceedings documents providing information the projects have requested during needs assessments and as they develop their projects. A recent list of publications available through TADS appears with their abstract in the Directory section of this book.

Many materials have been developed in several languages and are translated for use across the country and abroad. Materials developed by the Portage (Wisconsin) Project, for example, have been translated into eight languages. The Portage Project is but one example of large-scale impact that went well beyond original obectives.

State and national impact of HCEEP programs has been both varied and extensive. The Kentucky State Department of Special Education selected the Chapel Hill (North Carolina) Training-Outreach Project to train personnel at all 180 Kentucky school districts. Kentucky elected to use its entire state preschool incentive grant funding for this purpose, and the state department of education's early childhood coordinator has stated that without the experienced assistance and prepared materials of the Chapel Hill project, Kentucky would not have made as much progress phasing-in kindergarten programs that integrate handicapped children. The Chapel Hill project works in many other states as well.

The SKI*HI project (Utah) provides an illustration of impact on other systems through its development of a statewide screening for newborns. This project, working with the Utah State Health Department, produced a revised birth certificate format which includes high-risk indicators for hearing loss. The model offers follow-up help through home visits to every infant in the state who is found to be at risk for hearing impairment.

National impact is illustrated by the collaborative relationship of HCEEP and Head Start. Thirteen of the 15 Resource Access Projects (RAPS) charged with locating appropriate special services for handicapped children within Head Start are current or former HCEEP projects. In 1982–83 the RAPs had a key role in enabling Head Start to enroll 54,904 children with diagnosed handicaps. HCEEP and Head Start continue to cooperate in planning services and in developing and distributing materials.

Another HCEEP goal has been to develop new ways to diffuse practices proven at one location to other locations. The results of the Littlejohn impact analysis show that impact has successfully crossed state and regional lines, so that an agency wishing to receive information or help to introduce proven practices can select and use a model which has been developed elsewhere in the country.

Efficacy Data

The impact data from the Littlejohn study complemented an earlier study carried out under a contract with the Battelle Institute of Columbus, Ohio. The Battelle study sought to assess children's progress, the status of "graduates" of the projects, parent participation, and replication by other agencies. In 1975, 129 randomly selected children in 29 projects were tested, and progress in the personal-social, motor, cognitive, and communication domains was assessed. Battelle's final report showed that within all handicapping conditions, children made 1.5 to 2 times greater gains than would have been expected without the benefit of the project experiences. In some cases, as with educable mentally retarded children in the personal-social domain, the gains were even larger.

Battelle also evaluated parental satisfaction. Ninety-seven percent of parents perceived in their children positive changes or improvements which the parents attributed to the project. Since the major goal of early childhood projects is to prepare children to enter regular classrooms, whenever possible, the Battelle study looked at the placement of graduates, finding that 74 percent of the children in the sample were placed in public-school settings (64 percent were in regular placement, with half receiving ancillary services).

The Joint Dissemination Review Panel (JDRP) of the U.S. Department of Education provides further evidence of HCEEP's effectiveness. Projects may apply for approval for dissemination by submitting evidence of effective programming for children and information on the cost of replication. JDRP has thus far approved for dissemination 22 projects developed with HCEEP funds, including one that was approved after Littlejohn's impact analysis was completed.

"Efficacy Studies in Early Education," an article published in *The Journal of the Division for Early Childhood Education* (Volume 4, December 1981), contains additional data on effectiveness, much of it authored by staff of HCEEP projects. This journal is available from the Division for Early Childhood, Council for Exceptional Children, 1920 Association Drive, Reston, Virginia 22901.

Overview

Developed from survey information collected in 1983-84, this Overview section presents and compares the activities pursued by the five types of HCEEP projects.

Overview

The Handicapped Children's Early Education Program (HCEEP) leads a federal effort that fosters diverse and innovative approaches to the education of young handicapped children. HCEEP supports 164 grants and contracts throughout the United States and U.S. territories. Some projects demonstrate direct services to children and families. Other projects provide outreach activities, conduct research, plan statewide programs, or provide technical assistance. To show the range of activities of these projects, the Office of Special Education Programs (OSEP), U.S. Department of Education, contracted the Technical Assistance Development Systems (TADS) to conduct a survey of all projects funded during 1983–84. The results follow:

Demonstration Projects

HCEEP demonstration projects provide parents, communities, and professionals with innovative models for the early education of handicapped children. Projects are located in rural areas and inner cities, in small towns and suburban communities; the children have diverse social, ethnic, and economic backgrounds. In 1983–84, HCEEP funds 82 projects to demonstrate model programs.

A variety of intervention approaches help children with a broad range of handicaps. Some projects concentrate on a particular handicapping condition; other projects concentrate on factors such as age or cultural group, regardless of the handicap. Table 1 shows a breakdown by age and primary handicap of children served by demonstration projects. Over half of the children are under age 3 years, 97 percent of the children are under age 6 years. Children at risk for handicaps account for almost 20 percent of the children served by HCEEP demonstration projects. Projects report that 26 percent of the children are multihandicapped in addition to having a primary handicap.

Many of the projects stress services to a particular ethnic group (see Table 2). In keeping with their responsibility to demonstrate their models, most of these projects can share expertise, products, or practices with other projects.

Ultimately, HCEEP projects seek to improve opportunities for handicapped children. Part of the HCEEP philosophy is that families provide important first experiences for their infants and young children. Seventy percent of the projects list parent(s) and child as primary targets for direct services; 21 percent list only the child as the primary target (see Table 3). Some projects target neither the parents nor the child and instead serve professionals in the field.

Table 1

Demonstration: Handicapping Conditions and Ages of Children Served

Type of Handicap	Number of Handicapped Children Served by Age				Number of Children Served	Percent of All Children Served
	0-11 months (22.3%)	12-35 months (35.3%)	36-71 months (39.4%)	over 71 months (2.9%)		
At Risk	237	168	101	-	506	19
Trainable mentally retarded	71	114	125	4	314	12
Orthopedically impaired	49	116	44	1	210	8
Other health-impaired	26	27	28	-	81	3
Visually handicapped	22	30	19	-	71	3
Speech-impaired	21	104	184	1	309	12
Educable mentally retarded	21	54	78	6	159	6
Deaf/hearing-impaired	15	27	16	3	61	2
Specific learning disabilities	5	23	71	32	131	5
Seriously emotionally disturbed	4	27	68	5	104	4
Deaf-blind	3	7	1	-	11	<1
Other	107	225	293	26	651	25
TOTAL	581	992	1028	77	2608	100
Multihandicapped children	174	277	229	11	691	26

Projects responding to survey question: N = 82

Table 2

Demonstration: Major Focus or Stress on Service to Ethnic/Cultural Minorities

Ethnic/Cultural Group	Number of Projects	Percent of All Projects
Black	10	13
Hispanic	9	11
American Indian	5	6
Asian	3	4
Other	2	3

Projects responding to survey question: N = 79

Table 3

Demonstration: Primary Targets of Direct Services

Targets	Number of Projects	Percent of All Projects
Parent(s) and child	56	70
The child	17	21
Other professionals	2	3
Father	1	1
Other	4	5

Projects responding to survey question: N = 80

Table 4

Demonstration: Parent/Family Activities

Type of Activity	Number of Projects	Percent of All Projects
Participation on advisory board	75	94
Identification of parental needs and learning goals	75	94
Parent/staff conferences	73	91
Transition to next placement service	55	69
Classroom observation or teaching	55	69
Formal communications (e.g., newsletter, notes, telephone hot-lines, etc.)	55	69
Training workshops	53	66
Counseling groups	51	64
Advocacy	45	56
Maintenance of child progress records	40	50
Development of instructional materials	40	50
Social groups	37	46
Parents training other parents	25	31
Fundraising	24	30
Other noneducational or therapeutic services (e.g., job placement, public assistance, medical services, etc.)	20	25
Therapy supervision	13	16
Provision of respite care	11	13
Formal support groups for siblings	11	13
Other	20	25

Projects responding to survey question: N = 80

While primary targets for services vary, all the projects offer some sort of parent or family participation. Table 4 indicates that participation on advisory boards, identification of parental needs and learning goals, and parent/staff conferences are activities offered by almost all the projects. Over half the projects involve parents in the transition of their child to the next education placement, in classroom observation or teaching, in formal communication (newsletters, hot lines, etc.), in training workshops, in counseling groups, and in advisory activities. Most projects provide several parent or family activities.

Demonstration projects are primarily educational in focus. However, their fiscal agencies and the environments in which they deliver services vary. Table 5 indicates the types of fiscal agencies that sponsor demonstration projects. The two most common sponsors are private nonprofit organizations and nonmedical institutions of higher education. Several projects are sponsored by local education agencies. Four projects are sponsored by Indian tribes.

Table 6 lists the primary service delivery settings of the demonstration projects. Over half the projects serve children in their natural environment—the home. The great majority of these programs combine home intervention with outside services; only eight percent of the projects serve children exclusively in the home. Home-and-center (not public school) is the most common set-

Table 5

Demonstration: Fiscal Agencies

Type of Agency	Number of Projects	Percent of All Projects
Private, nonprofit organization	21	26
Institution of higher education (nonmedical)	20	25
Local education agency (LEA)	13	16
Institution of higher education (medical)	7	9
Health institution (e.g., hospital or other nonuniversity medical facility)	5	6
State educational agency (SEA)	3	4
Public agency (other than educational)	3	4
Regional or intermediate educational agency	2	3
Other	6	7

Projects responding to survey question: N = 80

ting for intervention by demonstration projects.

Certain settings make it possible for handicapped children to learn and play with nonhandicapped children. Integration experiences may involve special classes in regular schools, or they may involve handicapped and nonhandicapped children learning side by side. Table 7 shows that almost half the projects provide some sort of integration experience for the children, and over half of those projects fully integrate handicapped and nonhandicapped children in either regular or special settings. Many other projects find that the question of integration is inappropriate to their situation. Since over half of all projects provide services in the home, some may have had difficulty describing their overall programs in terms of the integration statement choices provided in the survey. Aside from the projects listing "not appropriate," only 11 percent provide no integration opportunity.

The particular developmental focus of intervention often depends on the model being demonstrated, as well as on the individual needs of the child. The Office of Special Education Programs requires projects to develop for each child an individualized education program (IEP) that specifies goals, teaching methods, and materials. As the child's needs change, so does the IEP.

Some projects focus on a particular area of child development (language-communication, for instance). Most projects, though, focus on many or all areas of development. This information can be found in the Index and in each project's abstract in the Directory section.

The primary philosophical approaches of demonstration projects' model curricula span a continuum from child-directed to teacher-directed learning. Projects de-

Table 6

Demonstration: Service Delivery Settings

Primary Service Setting	Number of Projects	Percent of All Projects
Home and center (not public school)	21	26
Center (not public school)	20	25
Home and public school	12	15
Public school	8	10
Home	6	8
Home and health center	3	4
Hospital or health center	1	1
Other	9	11

Projects responding to survey question: N = 80

scribe their philosophical approaches in their abstracts in the Directory section.

Projects use a variety of curricular packages or approaches. The Index lists curricula (used by each project with over half their children) by name and indicates which projects use each package. Many of the curricular packages or approaches were developed by the projects themselves and are available to be shared with other projects.

A variety of commercial and project-developed methods or devices help projects assess child progress for the purposes of planning instruction for the children and evaluating the programs. The Index lists these methods and devices by name and purpose and indicates which projects use each method (individual project abstracts in the Directory section describe administration schedules). Many projects have developed their own assessment devices, and most of these can be shared with other projects.

Refer to the Index section and to the project abstracts in the Directory section for more information about the 1983–84 demonstration projects.

Table 7

Demonstration: Integration Experience

Types of Experiences	Number of Projects	Percent of All Projects
Handicapped and nonhandicapped children are fully integrated in a regular early education setting	13	17
Handicapped children are integrated into a regular setting for some activities	12	16
Handicapped and nonhandicapped children are not integrated	8	11
Handicapped children are served in a special setting with nonhandicapped children fully integrated into that special setting	6	8
Handicapped children are served in a special setting with nonhandicapped children integrated into that special setting for some activities	4	5
Not appropriate to the project	22	29
Other	11	14

Projects responding to survey question: N = 76

Outreach Projects

The concept of model demonstration programs is carried a step further by HCEEP outreach projects. After three years of HCEEP demonstration funding, selected projects have the opportunity to enter an outreach phase, where they no longer place first priority on demonstrating a service model. Rather, these projects' primary mission is to encourage replication of their models while keeping in operation some portion of their direct service model. This year, 53 HCEEP outreach projects are "reaching out" to communities across the nation.

Outreach activities are varied. Table 8 shows the amount of time project staff members devote to particular replication activities. All the outreach projects train personnel. Most outreach projects spend some time on each activity listed in Table 8.

Almost all the projects develop and disseminate products (publications, curricula, assessment devices, audiovisual presentations, etc.). Products are designed for parents, teachers, administrators, health professionals, and the general public. Table 9 reveals the productivity and innovation of dissemination efforts and the variety of materials available within the HCEEP network. Refer to the Index and Directory sections for specific products available from individual outreach projects.

The transition from demonstration to outreach services involves a change in funding. The breakdown of fiscal agencies that administer outreach and demonstration projects are similar (Tables 5 and 10), but the fund-

Table 8

Outreach: Staff Time Spent in Outreach Activities

Activities	Number of Projects by Proportion of Staff Time				Number of Projects Engaging in Activity	Percent of All Projects Engaging in Activity
	1/4 or less	1/4 to 1/2	1/2 to 3/4	3/4 or more		
Training	19	30	2	-	51	100
Increasing awareness	48	-	-	-	48	94
Product development and dissemination	43	4	-	-	47	92
Stimulating sites	33	10	2	-	45	88
Stimulating state involvement	38	4	-	-	42	82
Other consultation activities	41	2	-	-	43	84
Other	12	1	-	-	13	25

Projects responding to survey question: N = 51

Table 9

Outreach: Materials Developed and Available to Share

Types of Material	Number of Projects	Percent of All Projects
In-service training or staff development materials	33	65
General awareness materials	31	61
Parent education materials	29	59
Program management/evaluation materials	26	51
Curricula for children	26	51
Bibliographies/reference materials	25	49
Observational checklists	19	37
Curricula for parents	18	35
Assessment instruments for planning instruction (0-3)	17	33
Teacher competencies or needs assessments	13	25
Assessment instruments for planning instruction (3-8)	12	24
Child progress assessment instruments (3-8)	12	24
Child progress assessment instruments (0-3)	11	22
Product development guides	4	8
Child screening instruments (3-8)	3	6
Child screening instruments (0-3)	2	4
Other	16	31

Projects responding to survey question: N = 51

ing strategies differ. Outreach projects receive HCEEP funds for replication efforts only, but the Office of Special Education Programs still requires these projects to maintain some portion of the direct services to children the projects provided in their demonstration phase. Outreach projects must therefore look to other sources to fund their direct services to children and families. Table 11 shows sources of continuation funding for direct service. Noneducational public agencies are the most popular funding sources. Note that private contributions and foundations account for less than 25 percent of funding for only 16 projects and 75 to 100 percent of funding for only one project. Almost half the projects receive 75 percent or more of their funds from a single source.

Characteristics of the education models of the outreach projects are similar to those of demonstration projects. For instance, HCEEP concern for parents and families is evident in the thrust of outreach project direct services; Table 12 indicates that almost three-quarters of the projects list family members as primary targets for direct services.

Table 10

Outreach: Fiscal Agencies

Type of Agency	Number of Projects	Percent of All Projects
Institution of higher education (nonmedical)	17	33
Private, nonprofit organization	15	29
Local education agency (LEA)	5	10
Regional or intermediate educational agency	5	10
Institution of higher education (medical)	4	8
Public agency (other than educational)	3	6
State educational agency (SEA)	1	2
Health institution (e.g., hospital or other nonuniversity medical facility)	1	2

Projects responding to survey question: N = 51

Table 11

Outreach: Sources of Continuation Funding for Direct Services

Type of Source	Number of Projects by Proportion of Funding				Number of Projects Funded by Source	Percent of All Projects Funded by Source
	1/4 or less	1/4 to 1/2	1/2 to 3/4	3/4 or more		
State educational agencies	5	5	5	4	19	37
Public agencies (other than educational)	7	5	4	6	22	43
Private, nonprofit organizations	9	3	-	2	14	27
Local educational agency	3	4	1	5	13	25
Private contributions	12	1	-	-	13	25
Federal educational agencies	3	3	1	-	7	14
Institutions of higher education	5	-	-	1	6	12
Private foundations	4	-	-	1	5	10
Regional or intermediate educational agencies	2	-	-	2	4	8
Other	8	-	2	2	12	24

Projects responding to survey question: N = 51

Table 13 lists the settings of the outreach projects. Almost half of the projects provide at least some service in the home.

Like demonstration projects, outreach projects may focus on a particular area of child development. However, most projects focus on all areas of development. This information can be found in the Index and in each project's abstract in the Directory section.

The primary philisophical approaches of their model curricula span a continuum from child-directed to teacher-directed learning. Projects describe their philosophical approaches in their abstracts in the Directory section.

Outreach projects themselves developed many curricular packages they use for direct services to children. In keeping with their responsibility to encourage replication of their models, most of these packages are available to share with other programs for children. The Index lists names of curricula developed or used by the projects.

Refer to the Index section and to the outreach project abstracts in the Directory section for more information about the 1983–84 outreach projects.

Table 12

Outreach: Primary Targets of Direct Services

Targets	Number of Projects	Percent of All Projects
Parent(s) and child	13	25
Both parents	9	18
Father	7	14
The child	4	8
Siblings	4	8
Mother/primary caretaker	4	8
Other professionals	1	2
Other	9	18

Projects responding to survey question: N = 51

Table 13

Outreach: Service Delivery Settings

Primary Service Setting	Number of Projects	Percent of All Projects
Home and center (not public school)	13	25
Center (not public school)	9	18
Home and public school	7	14
Public school	4	8
Home	4	8
Hospital or health center	4	8
Home and health center	1	2
Other	9	18

Projects responding to survey question: N = 51

State Implementation Grants

In 1976, the federal government established the state implementation grant (SIG) program to help states plan and coordinate new or expanding statewide early intervention services for handicapped children. SIG grants are awarded for up to two-year periods and may be renewed. Table 14 lists the 25 states that are sponsoring SIG projects.

Most states have passed laws that require local school systems to serve handicapped children. However, the details of these laws vary, particularly in respect to the ages and handicaps of the children the laws protect. Within the SIG program, for example, Arizona mandates services for persons age 5 to 21 years, regardless of handicap. Maryland state law, on the other hand, mandates services for persons from birth to age 20 years. Some states have passed permissive legislation which allows local school systems to choose whether or not to serve certain children. For example, Colorado has mandated services for persons age 5 to 21 years and permissive services for children birth to age 5 years. State legislation for each SIG state is included in the SIG abstracts in the Directory section of this book.

SIG planning activities fall into five broad categories:

- SIG **program development** activities lead to new directions in services to children and families. SIGs create pilot sites, strengthen existing service programs, and stimulate local education agencies to provide intervention.
- The area of **administration/management/evaluation** incorporates a variety of SIG activities, from designing approaches for better state management of the SIG grant itself to consulting with local programs about improving methods of evaluating child progress. SIGs develop early childhood data systems, program guidelines and standards, and evaluation and monitoring strategies.

Table 14

SIG: Current SIG States

Arizona
California
Colorado
Connecticut
Delaware
Florida
Georgia
Hawaii
Iowa
Kansas
Louisiana
Maine
Maryland
Montana
New Hampshire
New Jersey
New York
North Carolina
North Dakota
South Dakota
Tennessee
Washington
West Virginia
Wisconsin
Wyoming

Table 15

SIG: Activities and Products

Features	Number of SIGs	Percent of All SIGs
Technical Assistance/In-Service Training	22	88
Interagency Agreements	21	88
Planning/Advisory Committee to Oversee Implementation of Plan	21	84
Statewide Needs Assessment	20	80
Consortium of Early Childhood Special Education Professionals	15	60
Comprehensive Plan for Services	13	52
Early Childhood Special Education Guidelines	12	52
Early Childhood Special Education Rules, Regulations or Standards	12	48
Resource Materials	12	50
Early Childhood Special Education Teacher Certification	11	44
Statewide Tracking System	6	24
Efficacy Data	4	16

SIGs responding to survey question: N = 25

- SIGs invest substantial resources planning for **personnel development**. Several states design training opportunities for parents as advocates and teachers. Professionals receive training through workshops, institutes, seminars, and graduate-level practicums.
- **Communication and dissemination** activities influence or inform specified audiences. SIGs communicate through a variety of printed materials, audiovisual products, statewide conferences, and radio and TV promotions. Products developed by and available from the SIGs are listed in the individual abstracts in the Directory section of this book.
- SIGs plan and implement cooperative efforts among state and local agencies that serve young handicapped children. **Interagency coordination** can save money and eliminate fragmented services at the local level.

SIGs involve themselves in many areas and work to develop common products and results. Table 15 shows some popular SIG activities and products. Note that over half the projects participate in most of the areas queried.

Refer to the Index section and to the SIG abstracts in the Directory section for more information about the 1983–84 SIGs.

Early Childhood Research Institutes

Three early childhood research institutes (ECRI) have the mission to discover and disseminate knowledge that can be used to improve services and programs for exceptional young children and their families.

- Carolina Institute for Research on Early Education of the Handicapped (CIREEH)
  University of North Carolina at Chapel Hill
  CIREEH researchers focus on the families of young moderately and severely handicapped children birth to age 5 years; develop and disseminate intervention materials for parents and professionals; train graduate students to conduct research in this area; conduct a self-evaluation; and coordinate CIREEH's activities with those of the other ECRIs.
- Early Childhood Research Institute
  University of Pittsburgh
  The major purpose of this ECRI is to develop procedures for assessing and teaching social and related skills to autistic-like preschool children so these youngsters will abe able to participate successfully in instructional settings with nonhandicapped or less handicapped children.
- Early Childhood Research Institute
  Utah State University, Logan
  Major objectives of this ECRI are to examine previously conducted research on early intervention to determine what is known, what gaps exist, and where future research should focus; to develop a model for cost effectiveness analysis; to conduct research to identify the most important problems and issues encountered in typical service settings; to disseminate information about the institute's findings to a broad audience of professionals and families; to train graduate students and research assistants in research techniques and effective intervention methods; to evaluate the impact of the institute's findings; and to solicit criticism and feedback on the institute's activities.

For more information about the ECRIs, refer to the abstracts in the Directory section of this book.

Technical Assistance

Helping handicapped and at-risk children and their families is a complex task, so the Office of Special Education Programs provides support to HCEEP through a contract with a technical assistance agency. The term "technical assistance" refers to ongoing, systematic, and nonevaluative help.

The Technical Assistance Development System (TADS) has been serving as a technical assistance agency for demonstration, outreach, and SIG projects since 1971. TADS is a program of the Frank Porter Graham Child Development Center of the University of North Carolina at Chapel Hill.

TADS offers a broad range of support services that help HCEEP grantees manage programs and accomplish goals. Projects receive this responsive assistance through individual on-site consultation, small-group workshops, large meetings, and an extensive publications program. TADS also arranges field visits between projects to promote collaboration and transfer of new practices, knowledge, and products.

Refer to the TADS abstract in the Directory section for more information.

Directory

This section contains abstracts of all 164 HCEEP projects. The projects are grouped by type (demonstration, outreach, state implementation grant, early childhood research institutes, technical assistance center) and listed alphabetically according to state and city within each group.

Madison Area High-Risk Project

ADDRESS: Madison County Association for
Retarded Citizens, Inc.
P.O. Box 1063
Huntsville, Alabama 35807

PHONE: (205) 539-2266

YEAR OF FUNDING: 1

FISCAL AGENCY: Madison County Association for Retarded Citizens, Inc.

DIRECTOR: Elizabeth McMurtrie
OTHER STAFF TITLES: developmental specialist, developmental therapist, social worker, nurse

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 to 40 children birth to age 3 years who are considered at risk for developmental delays and other handicapping conditions. Children are identified when placed in the local neonatal intensive care unit. The families live in a predominantly rural 13-county area.

PROGRAM FOR CHILDREN:

An eclectic curriculum is provided which combines the Memphis Model, Small Wonder, and the Primary Progress Assessment Chart Taxonomy. Infants birth to age 18 months receive home therapy and attend a center once every two weeks for more intensive activities. Children age 18 to 36 months attend the center two to three days weekly and are visited by a home teacher once every two weeks.

MEASURES OF CHILD PROGRESS:

Child progress is documented by six-month evaluations of the extent to which each child attains the objectives specified in the child's individual education plan. Developmental assessments include the Rosenzweis Behavior Profile, the Milani-Comparetti Developmental Test, the Denver Developmental Screening Test, and the Bayley Scales of Infant Development.

PROGRAM FOR PARENTS:

Home visits with the parents are a major part of the intervention services. Parents are taught specific techniques for interacting with and teaching their children. The project's social worker has primary responsibility for helping parents understand and cope with their children's handicapping condition. A parent questionnaire is administered at entry to the program and is updated regularly. Counseling is scheduled as needed and a parent support group meets monthly.

FEATURES AND PRODUCTS:

Products to be developed include a guide to projects for high-risk infants, a videotape of project activities, and a directory of public places of interest for parents and children (directions show parents how to make such excursions valuable learning experiences for the infant).

Project ENRICH
Early Need Recognition Involving Children with Handicaps

ADDRESS: Special Education Department
549 N. Stapley Drive
Mesa, Arizona 85203

PHONE: (602) 898-7862

YEAR OF FUNDING: 3

FISCAL AGENCY: Mesa Public Schools

DIRECTOR: Harold J. McGrady
COORDINATOR: Leslie Small
OTHER STAFF TITLES: early childhood special education teacher, speech and language specialist, instructional aides, clerk

CHARCTERISTICS OF TARGET POPULATION:

Project ENRICH serves a minimum of 20 children in a structured classroom setting. The program is designed for 3- to 5-year-old children whose delayed language and cognitive development indicates that special education services may be required by school age. The program is located in an urban area and uses school district attendance boundaries covering approximately 200 square miles. Project ENRICH children are those who would typically qualify for placement in programs for educable mentally handicapped, trainable mentally handicapped, or severely language disordered.

PROGRAM FOR CHILDREN:

Children participate in a structured classroom setting for three hours two or three mornings weekly, and parents and children participate in an individual home program. The project's transdisciplinary model incorporates systematic educational assessment, individual education programs, and structured individual implementation plans. A criterion-referenced assessment instrument developed by the project provides continuous evaluation of developmentally sequenced objectives.

MEASURES OF CHILD PROGRESS:

Measurement of child progress on individual goals and objectives is monitored continuously and reported formally to parents on a quarterly basis. Pre/post data is reported on the following instruments: Preschool Language Scale, Sequenced Inventory of Communication Development, Peabody Picture Vocabulary, Vocabulary Comprehension Scale, and the ENRICH Inventory. An individualized intelligence measure and adaptive behavior measure is administered at program entry and exit.

PROGRAMS FOR PARENTS:

Parents complete a written needs assessment which identifies specific activities, materials, and training which the project can provide. The project maintains an information and materials resource center. Parents observe and participate in the classroom, develop and review education plans, attend conferences, and participate on the advisory council.

FEATURES AND PRODUCTS:

ENRICH has developed exportable home intervention instruction kits with activities correlated to educational objectives and a program resource guide that includes these eight modules: Program Administration, Referral/Screening, Child Evaluation and Individualized Education Programs, Curriculum and Instructional Activities, Parent/Family Involvement, Staff Development, Interagency Coordination, Program Evaluation.

Project Yaqui

An Environmentally Based Program for Young Native American Children

ADDRESS: Project Yaqui
4821 West Calle Vicam
Tucson, Arizona 85746

PHONE: (602) 883-4678

YEAR OF FUNDING: 3

FISCAL AGENCY: Pasqua Yaqui Tribe

DIRECTOR: Carol Loumeau
OTHER STAFF TITLES: preschool teachers, resource assistants, teacher/aide

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 18-month- to 5-year-old Yaqui children and their parents. Families live on the reservation. Children have language delays, articulation disorders, mild learning delays, and are at risk for learning disabilities.

PROGRAM FOR CHILDREN:

Project Yaqui's ecological approach identifies each child's strengths and needs and meets them in a culturally appropriate manner. The program emphasizes the development of language and cognitive abilities in a social context. Three- to 5-year-old children attend small and large groups and individual sessions at the center. Individual development plans are written for each child and are the source of weekly curriculum objectives.

MEASURES OF CHILD PROGRESS:

The Leiter International Performance Scale, Illinois Test of Psycholinguistic Abilities (ITPA), Spanish and bilingual speech/language evaluations, Bayley Scales of Infant Development, and Stanford-Binet are used for diagnosis. Exit evaluations provide post data as well as placement information. Pre/post information is used to plan curricula and group and individual programs. Assessments are done upon entry, twice yearly, and at exit. The Assessment by Behavior Rating and the Curriculum-Assessment Tool are used.

PROGRAM FOR PARENTS:

Parents or other family members participate in Learning Centers, Teacher-Parent Time (an instruction time for parents), Teacher-Child Time (rug time), and Free Play (gives parents a chance to make a take-home toy.) Parents are encouraged to work in the classroom, participate on the advisory board, attend monthly programs, help develop individual education plans, and attend monthly meetings and biannual parent-teacher conferences.

FEATURES AND PRODUCTS

The project adapts screening and assessment tools to meet the cultural and linguistic needs of the children. The Assessment by Behavior Rating has been revised and translated into Spanish. Upon completion of a Yaqui dictionary by the tribe, a Yaqui translation will be available. Other materials include an adaptation of the Minnesota Child Development Inventory as a parent interview, circle and color books, cultural materials (such as pictures for language stimulation), set cards and books, alphabet cards and books, parent and child activity lesson plans, take-home activity kits, and a fine-motor activities program.

Focus Classroom

ADDRESS: Focus, Inc.
2905 King St.
Jonesboro, Arkansas 72401

PHONE: (501) 935-2750

YEAR OF FUNDING: 3

FISCAL AGENCY: Focus, Inc.

DIRECTOR: Barbara L. Semrau
COORDINATOR: Charlotte B. Staggs
OTHER STAFF TITLES: teacher, aides, language specialist, speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 children age 2 to 6 years whose handicaps include moderate and severe/profound mental retardation, visual and hearing impairments, and multi-handicapping conditions.

PROGRAM FOR CHILDREN:

The project's individualized developmental approach to student curriculum emphasizes language development and individual learning style. Although lessons are designed for each child's individual objectives, activities are conducted in small groups and involve all children. The program has expanded from one to two classrooms. The original classroom is housed in a public school building along with Head Start, and the children join the public kindergartens in the lunchroom and playground. During the third year of funding a second classroom was established. Though Arkansas schools are not mandated to serve children until age 6 years, the public school district provides classroom space, materials, and transportation.

MEASURES OF CHILD PROGRESS:

The project uses the DASH and LAP-D to assess child progress.

PROGRAM FOR PARENTS:

Many parents have developed a genuine sense of ownership toward the project and are working with the staff to continue the program after HCEEP funding.

FEATURES AND PRODUCTS:

The project trains paraprofessionals and has developed a training manual for aides who work with young handicapped children. An activity-based language curriculum has been developed that emphasizes functional communication during all parts of the day (at school and at home).

DEEP

Developmental Early Education Project

ADDRESS: Department of Rehabilitation and
Special Education
University of Arkansas at Little Rock
2510 Fairpark Blvd.
Little Rock, Arkansas 72204

PHONE: (501) 663-9496

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Arkansas at Little Rock

DIRECTOR: Louise Phillips

OTHER STAFF TITLES: co-director, project administrator, parent coordinator, head teacher, project evaluator, medical coordinator, occupational therapist, physical therapist, speech therapist, teacher's aide, project secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 6 years with a variety of disabilities. Service preference is given to younger children and to children about whom diagnostic or management questions remain after an initial evaluation in another setting.

PROGRAM FOR CHILDREN:

Children receive an intensive, time-extended, assessment-oriented educational experience. Individual education and home management plans are developed for each child. Eight children can be served for two- to eight-week periods. Outside consultants screen children and make recommendations to be carried out during enrollment in DEEP.

MEASURES OF CHILD PROGRESS:

The project measures child progress with a variety of instruments (LAP, Brigance, Portage) to cover the wide age range of chidren in the program.

PROGRAM FOR PARENTS:

Parents are observed as they interact with their children at home according to the HOME (Home Observation for Measurement of the Environment) Inventory. The project assesses parents' needs for support services. Intervention activities are individual and group based and use services provided by other community agencies as well as DEEP.

FEATURES AND PRODUCTS:

The project has developed individualized education and home management plans for children and parents, a description of the parent program, and Daily Exercises for Educational Play, a book of activities for parents to perform at home with their children.

Special Family Support Program

ADDRESS: Child Development Center
Children's Hospital Medical Center
51st and Grove Streets
Oakland, California 94609

PHONE: (415) 655-9521

YEAR OF FUNDING: 1

FISCAL AGENCY: Children's Hospital Medical Center

CO-DIRECTOR (administrative): Nancy Sweet
CO-DIRECTOR (clinical): Rosamund Gardner
OTHER STAFF TITLES: parent/infant educational coordinator, clinical social worker, infant development specialists

CHARACTERISTICS OF TARGET POPULATION:

Services target handicapped and high-risk infants whose disturbed relationships with their parents limit the effectiveness of current family oriented educational approaches. The project serves 10 infants and families who fall into one of the following categories: 1) handicapped infants in disturbed relationships with their parents; 2) premature infants less than 1500 grams or 32 weeks gestational age who are in disturbed relationships with their parents; 3) unserved populations of chronically ill infants; 4) unserved babies at risk due to abuse, neglect, and other environmental factors.

PROGRAM FOR CHILDREN:

The project provides an individualized developmental program which selectively combines a weekly home program, weekly group program activities (either special education or mainstreamed group), individual center-based educational sessions, in-hospital programs, and monthly multidisciplinary behavioral observations.

MEASURES OF CHILD PROGRESS:

Appropriate norm-referenced tests, primarily the Bayley Scales of Infant Development, will be administered at entry to the program and at six-month intervals thereafter. Interaction between parent and child will be assessed using videotapes of structured and unstructured interaction.

PROGRAM FOR PARENTS:

The program combines clinical support services with parent education and parent participation in the developmental program for the child. The program seeks to improve dysfunctional relationships between parent and child. Each individualized parent program selectively combines home- and center-based parent education, weekly parent support groups, infant and parent psychotherapy, marital and crisis counseling, in-home respite, and in-hospital support.

FEATURES AND PRODUCTS:

The project serves a "double-risk" population of handicapped and high-risk babies (developmental outcomes are also jeopardized by a dysfunctional parent and infant relationship). The model integrates an infant developmental and educational program with clinical support for the parents and can be adapted by existing infant development programs for unserved or ineffectively served "double-risk" infants.

Neuro-Cognitive Reeducation Program

ADDRESS: Children's Services Center
Casa Colina Hospital
255 East Bonita Avenue
Pomona, California 91767

PHONE: (714) 593-7521
ext. 275

YEAR OF FUNDING: 1

FISCAL AGENCY: Children's Services Center, Casa Colina Hospital

DIRECTOR: Elizabeth M. Neumann
OTHER STAFF TITLES: teacher, neuro-psychological intern, teaching assistant, secretary, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children age 3 to 8 years who have a diagnosed brain injury with a clearly identifiable cause.

PROGRAM FOR CHILDREN:

The program operates a combination home- and center-based tutorial program. The teacher/tutor works with the child in individual one- to four-hour sessions three to six times weekly. There are four steps in the child's educational process: 1) assessments, 2) program planning, 3) "basix" cognitive reeducation, and 4) "transfer" cognitive reeducation.

MEASURES FOR CHILD PROGRESS:

All children are given three tests: McCarthy Scales of Children's Abilities, Alpern-Boll Developmental Profile, and Brigance Inventory of Early Development and Basic Skills. These measures are administered four times yearly at program entry and at six, 12, and 18 months after entry. A test battery of neuro-cognitive measures is also administered upon entry into the program.

PROGRAM FOR PARENTS:

Parents participate in the teaching sessions as soon as the parent and child can work effectively together. Parents attend pretraining periods to learn the cognitive strategies designed for their children. During the second year, parents may receive counseling, if needed.

FEATURES AND PRODUCTS:

The project proposes to develop a computer assisted "brain," a behavior assessment and instructional method which identifies and uses "spared" abilities to teach the child to use new strategies for thinking, learning, and remembering. The project uses a comparison group to assess effectiveness.

Linkage: Infant Special Care Center and Project Hope

ADDRESS:
Infant Special Care Follow-Up Program
University of California
San Diego Medical Center
225 W. Dickinson H814J
San Diego, California 92103

PHONE: (619) 294-5745

YEAR OF FUNDING: 1

FISCAL AGENCY: UCSD School of Medicine

CO-DIRECTORS: T. A. Merritt, Suzanne Dixon, and Virginia MacDonald
OTHER STAFF TITLES: nurse consultant, occupational therapist, education specialists, parent/infant educator, staffing coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 to 60 at-risk, preterm infants (birthweights less than 1500 grams) sustaining varying grades of intra-ventricular hemorrhage (IVH) soon after birth.

PROGRAM FOR CHILDREN:

Infants identified within the neonatal intensive care unit (NICU) receive sequential developmental assessment from nursery discharge through 12 months adjusted age. Infant education specialists help plan the infants' discharge from the NICU to the home. Infants receive follow-up services by teams of physicians, nurses, and education specialists. These teams plan and implement a developmental program for each infant and family. Infants receive periodic medical follow-up with physical, neurologic, vision, hearing, and neurosurgical evaluation.

MEASURES OF CHILD PROGRESS:

The project uses the Assessment of Premature Infants' Behavior Scale, the Dubowitz Neurodevelopmental Assessment, the Amiel-Tison First-Year Evaluation, and the Bayley Scales of Infant Development. Standardized assessments of occupational skills and audiologic and visual functions are performed. Developmental Assessments in the special education program include the Minnesota Child Inventory, Stanford-Binet, California Preschool Social Competency Scale, and Education for Handicapped Infants.

PROGRAM FOR PARENTS:

Parents receive medical and social support and infant developmental counseling and training. Parents may attend peer and professional support groups. The parent acts as infant therapist under the direction of Project Hope. The project focuses on transition from medical follow-up to the special education program.

FEATURES AND PRODUCTS:

The project coordinates medical and special education services. A parent interaction curriculum, a pamphlet for parents on preterm infants, IVH, hydrocephalus, and neurosurgical therapies, and a text on the unique handicapping conditionsof IVH among preterm infants will be developed. The project serves English- and Spanish-language families.

Project IINTACT

Infant Interagency Network Through Accessing Computer Technology

ADDRESS: San Diego State University
5504 Lindo Paseo
San Diego, California 92182

PHONE: (619) 286-2467

YEAR OF FUNDING: 1

FISCAL AGENCY: San Diego State University Foundation

DIRECTOR: Eleanor Lynch

OTHER STAFF TITLES: early childhood special educator, social worker, pediatric nurse practitioner, community outreach workers, secretary, programmer/puter systems analyst, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 3 years. Children with any handicapping condition are eligible for services. The project places a special emphasis on children from Hispanic, Asian, and Native American families.

PROGRAM FOR CHILDREN:

The project seeks to develop a computerized interagency referral and service delivery model to provide comprehensive services to children. The project also provides direct, short-term assessment and educational intervention and referral services. The staff develops individual written programs and activities which can be carried out in the home by the primary caretakers. Staff members teach the caretakers to conduct the activities and monitor the children's progress through home visits, telephone, and reassessment. Following exit from the program, staff members help find appropriate services for each child.

MEASURES OF CHILD PROGRESS:

Upon entry into the program, each child is assessed using the Early Intervention Developmental Profile. Children are reassessed every four months thereafter and at exit from the program. Staff members also maintain anecdotal progress records for each child.

PROGRAM FOR PARENTS:

The project views services to parents as important services to children. Family needs are identified in the areas of health, language, education, and social support. Project staff members help parents find services to meet identified needs. Parents are invited to parent education meetings and each family receives home visits on a weekly, biweekly, or monthly basis. Parent workshops are planned using the curriculum, Connections: Developing Skills for the Family of the Young Special Child, 0-5. Since the project's goal is to provide short-term services, families are helped to find other long-term services within a year.

FEATURES AND PRODUCTS:

The project is developing a computerized index of service needs and a computer-based index of services for handicapped and high risk children birth to age 5 years.

ISIS

Integrated Special Infant Services

ADDRESS: Department of Special Education
San Francisco State University
1600 Holloway Avenue
San Francisco, California 94132

PHONE: (415) 585-1026
469-1306

YEAR OF FUNDING: 1

FISCAL AGENCY: Frederic Burk Foundation for Education

DIRECTOR: Marci Hanson
ASSISTANT DIRECTOR: Mary Krentz
OTHER STAFF TITLES: special education teacher, physical or occupational therapist, language specialist, psychologist consultant, medical consultant, secretary

CHARACTERISTICS OF TARGET POPULATION:

Twenty children are selected from three groups of children with established or biological risks for handicapping conditions. The groups from which these children are drawn are: 1) children who test below 50 percent expected age level of development on a standardized infant development scale or who have an identifiable disabling condition, 2) severely handicapped infants and toddlers, 3) infants who are at risk because of low birthweight, birth complications, or severe social-emotional difficulties.

PROGRAM FOR CHILDREN:

Handicapped and at-risk infants and toddlers and a limited number of normal infants and toddlers participate in the program. Services are delivered through a combination center- and home-based program. The center-based program is located in a public shcool. The project provides transdisciplinary services to the children in an integrated setting with the active involvement of the children's families.

MEASURES OF CHILD PROGRESS:

Children are assessed at the beginning and end of the school year using the Bayley Scales of Infant Development, Uniform Performance Assessment System, and a project-developed, criterion-referenced checklist. Children's progress through instructional programs is assessed on a daily and weekly basis using trial-by-trial data collected by parents and teachers.

PROGRAM FOR PARENTS:

The project's primary focus for family involvement is two-fold: 1) to help parents enhance their children's development and 2) to foster mutually satisfying interaction between parent and infant. Families are actively involved in instruction and receive guidance on "reading" their infants' signals, child development, and special education techniques. Clinical intervention services with the parent and child attempts to enhance the relationship and further the parents' understanding of their children's unique behavior patterns. Support services, optional classroom activities, and referrals to needed community services are available.

FEATURES AND PRODUCTS:

The project expects to produce a social cueing curriculum for parents, a manual detailing consortium-coordinated service delivery systems, and professional reports and presentations.

The Playschool

ADDRESS: University of Colorado Health Sciences Center
Rocky Mountain Child Development Center
4200 East Ninth Avenue
Denver, Colorado 80262

PHONE: (303) 394-8606

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Colorado Health Sciences Center

DIRECTOR: Sally J. Rogers
OTHER STAFF TITLES: psychologist, teacher, assistant teacher, family coordinator, speech and language pathologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 14 children age 2 to 5 years with autism or severe emotional or behavioral disorders. Most of the children demonstrate some developmental delays.

PROGRAM FOR CHILDREN:

The project provides a three-hour classroom program four days weekly. The curriculum is based on cognitive ego developmental theories and emphasizes communication skills, constructive play skills, and social relationships with peers and adults. Classroom emphasis is on learning through play, and play will be the primary vehicle for fostering developmental growth and change. The INREAL system of language facilitation is the communications model used, and both signs and speech are used throughout the daily program.

MEASURES OF CHILD PROGRESS:

Project staff members measure child progress by pre- and post-treatment changes based on videotaped samples of various behaviors: communication with parents and teacher, stranger and separation distress, approach to peers, level of free-play behavior, level of symbolic play, and dyadic interactions with mother and teacher. The project also assesses language development with the SICD; psychological development with the Stanford-Binet, Leiter, and Vineland; and classroom progress with Developmental Programming for Infants and Young children.

PROGRAM FOR PARENTS:

Parents participate directly in parent groups and in center- and home-based programs. Each family has a coordinator with whom the parents meet weekly to work toward meeting a parental objectives.

FEATURES AND PRODUCTS:

Products will include the development of teaching guidelines for integrating emotionally disturbed children into generic early childhood programs, a play assessment tool, and a play curriculum for severely disturbed young children.

FIRST

Family Infant Resource Stimulation Term

ADDRESS: Darcy Elementary School
1686 Waterbury Road
Cheshire, Connecticut 064100

PHONE: (203) 272-3577

YEAR OF FUNDING: 1

FISCAL AGENCY: Cheshire Department of Education

DIRECTOR: Lois Rho

OTHER STAFF TITLES: teachers, psychologist, speech/language clinician, secretary, financial secretary, video consultant, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project provides educational programming for 12 to 15 moderately to severely handicapped children and less intense support for 40 to 50 other children. The children range in age from birth to 3 years. Children accepted into the program have a significant delay in two or more developmental areas, a serious trauma (such as a major illness), or inadequate parenting. The primary caretaker must be willing to participate in the program.

PROGRAM FOR CHILDREN:

The project provides a combined home- and center-based program with flexible scheduling. Children attend the center-based program one to three days weekly for one and one-half to two and one-half hours daily. Home visits (60 to 90 minutes), occur once or twice monthly to provide the parent with advice on how to arrange the home environment to foster development of the child. In the center-based program, the teacher and parent observe the child at play, develop hypotheses, make interventions, and evaluate the impact of changes.

MEASURES OF CHILD PROGRESS:

Children's progress is measured using the Early Learning Accomplishment Profile. The data is analyzed in two ways: each child serving as his or her own control, and through comparison with the group.

PROGRAM FOR PARENTS:

Parents are involved in all aspects of the program, from the initial evaluation to exit. The program is intended to involve the whole family, including grandparents and siblings. Consultants and specialists are available to help parents as necessary. Parent progress is measured using a project-developed questionnaire. Responses of parents involved in the program are compared to the responses of parents not involved.

FEATURES AND PRODUCTS:

The project provides community-wide workshops on topics such as nutrition, child development, and toys. The project also manages a small resource center of books, pamphlets, and periodicals related to young children. Project-developed products include booklets on individual children and a series of training videotapes.

DEMONSTRATION 13

AID
Adolescent-Infant Development

ADDRESS: Department of Pediatrics & Child Health
Howard University Hospital
2041 Georgia Avenue, NW
Washington, DC 20060

PHONE: (202) 745-1596

YEAR OF FUNDING: 1

FISCAL AGENCY: Department of Pediatrics and Child Health

DIRECTOR: Eva Molnar
COORDINATOR: Roberta Johnson-Clark
OTHER STAFF TITLES: administrative assistant/project secretary, parent educator/social worker, teacher/child development specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 10 to 15 infants and young children between birth and age 4 years whose parents are adolescents. Mothers can be referred to Project AID before they give birth, based on medical criteria for medium to high risk for delivering a handicapped infant. Infants who are handicapped or are at medium to high risk for future handicapping conditions can also be referred to the project.

PROGRAM FOR CHILDREN:

During the first year of life, children receive weekly half-hour enrichment classes during which a developmental specialist works with the child and helps parents carry out the activities. During the second year of life, these sessions are extended to one hour. When the child reaches at least 18 months of age and can walk, the child is reevaluated and placed in either a half-day enrichment class or a regular preschool program. The The Memphis Instrument is used to develop short- and long-term objectives for each child. Home visits are provided at least four times yearly.

MEASURES OF CHILD PROGRESS:

Child progress is measured using pre- and post-administrations of the Bayley Scales of Infant Development.

PROGRAM FOR PARENTS:

The parents or caretakers of the infants are involved in all phases of the program. From the prenatal period through the delivery of the infant and the first four years of the infant's life, parents are instructed and assisted in the medical, educational, developmental, nutritional, and safety needs of the infants. Parents are also helped with their own developmental and educational needs.

FEATURES AND PRODUCTS:

The project has developed several slide shows for parent training. Two personal booklets for adolescent parents, written in diary form, contain information on pregnancy and child care.

High School and Preschool Partnership Program

ADDRESS: Countryside High School
3000 S. R. 580
Clearwater, Florida 33519

PHONE: (813) 442-1171

YEAR OF FUNDING: 1

FISCAL AGENCY: School Board of Pinellas County, Florida

PROJECT MANAGER: Janelle R. Johnson-Jenkins
PROJECT SUPERVISOR: Jonathan C. McIntire
OTHER STAFF TITLES: teacher, teacher aide, clerk, consultant

CHARACTERISTICS OF TARGET POPULATION:

The project serves children age 3 to 6 years who have been screened by the Florida Diagnostic and Learning Resources System and meet the eligibility requirements for mild to moderately handicapped and are not already being served by other community agencies. The children represent many socioeconomic, social, and ethnic backgrounds. Handicaps include physical impairments, visual and hearing impairments, speech and language disabilities, and mild to moderate retardation. The project also offers a screening component for children birth to age 3 years who are suspected of having a handicap.

PROGRAM FOR CHILDREN:

The project operates a self-contained class for ten preschool handicapped children with a part-time preschool class for 20 nonhandicapped children. The project also offers high school child care classes. The parents and teacher of each handicapped preschooler prepare and individual education plan (IEP) for each child. The ERIN curriculum is used with supplementary materials from other available preschool curricula. The thrust of the curriculum is on developing language, fine-and gross-motor, cognitive, and social skills. Children screened in the birth to 3 component receive home-based services.

MEASURES OF CHILD PROGRESS:

Ongoing assessment of children's progress uses criterion-referenced norms provided by the selected curriculum. Final yearly evaluations consist of an appropriate diagnostic inventory for each preschool student.

PROGRAM FOR PARENTS:

Parents help evaluate the program and develop IEPs for their children. Bimonthly parent counseling groups explore growth and development, special education techniques, and parenting skills. Parents may volunteer in the classroom and may observe their children on videotape. Parents also help make learning materials and equipment.

FEATURES AND PRODUCTS:

A parent information pamphlet will be available that will inform parents of newborns of available community resources. The pamphlet also gives information concerning developmental milestones and pinpoints possible trouble signs. A unique feature of the preschool program is that high school students enrolled in child care classes participate in the delivery of services. The project has identified this component of its program as a replicable technique.

Project STRETCH

Strategic Training for Rural Education Targeting Children who are Handicapped

ADDRESS: Project Stretch
1005 S.E. 4th Avenue
Gainesville, Florida 32601

PHONE: (904) 375-7790

YEAR OF FUNDING: 1

FISCAL AGENCY: Alachua County Association for Retarded Citizens

DIRECTOR: Tess Bennett
OTHER STAFF TITLES: child psychologist, child development specialists, speech therapist, consultants, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children birth to age 5 years who live in rural Florida.

PROGRAM FOR CHILDREN:

Professionals make weekly visits to the home. Since one focus of the project is helping parents to enjoy their child, play activities are demonstrated to encourage positive interaction. Another focus of the program is to train parents to teach their handicapped child. Parents learn to develop instructional objectives for their child, observe developmental milestones, and record daily progress. Parents help develop individual education plans for their children.

MEASURES OF CHILD PROGRESS:

Children are assessed using the Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities. The Learning Accomplishment Profile (LAP), LAP-D, and Early LAP are used to develop short-term objectives. The HOME is administered every six months.

PROGRAM FOR PARENTS:

Parents' needs are assessed when they enter the program, and goals are formulated. Parents also fill out a self-report measure which reflects how confident they feel about working with their children. Parents are offered a variety of options which include individual instruction, family support meetings, small-group meetings, monthly parent meetings, involvement on the advisory council, Saturday morning workshops, toy- and material-making making workshops, and sibling meetings.

FEATURES AND PRODUCTS:

The primary components of the program are family support, family training, and educational experiences for children. The project focuses on promoting positive relationships between the children and mothers, fathers, siblings, and extended family members. The staff psychologist works closely with families and professionals to promote understanding of the assessment. This link between assessment and intervention maximizes the children's development.

Family Involvement with At-Risk and Handicapped Infants

ADDRESS: Special Education Department
University of Idaho
Moscow, Idaho 83848

PHONE: (208) 885-6159

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Idaho

DIRECTOR: Dale Gentry
OTHER STAFF TITLES: center/home programmers, social worker, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves at-risk, premature, chronically ill, and handicapped infants birth to age 3 years and their families regardless of the type or severity of the child's handicap.

PROGRAM FOR CHILDREN:

Project staff members assess family needs and use a service model which promotes family-child interaction. Parents choose from the following service options: 1) a home-based program, 2) a center-based program, 3) a home/center-based program, 4) a parent parent support and instruction program, and 5) a combination of any of the above. The curriculum design for child intervention is based on the Systematic Instruction Model which includes assessment, specification of long -and short-term objectives, and development and implementation of a plan for instruction, and measurement procedures. The plan is modified based on data, and overall progress is evaluated. Children work on sensory-motor, motor-communication, social, and self-care skills.

MEASURES OF CHILD PROGRESS:

Children are assessed initially and periodically on developmental scales. Data are collected daily, or nearly daily, on each of the target behaviors.

PROGRAM FOR PARENTS:

A support and instruction program meets weekly to educate parents about the characteristics and needs of handicapped children. Family counseling research is incorporated into the management of these groups. The project seeks to enhance interaction between the infant and parent. and a questionnaire evaluate levels of stress and patterns for coping with and responding to stressful situations. Periodic videotaping detects changes in interaction style.

FEATURES AND PRODUCTS:

The project proposes to provide information to, and work with, other professionals in the community, including the medical community, county health, and others. The goal will be community involvement in the identification and referral process. The project incorporates several areas of family research: 1) changing structure of the family; 2) the interactive nature of the parent-child relationship; 3) the long-range impact of the handicapped child on family stress; and 4) the application of systems theory to early intervention.

Chicago Intervention Project

ADDRESS:
Institute for the Study of Developmental Disabilities
University of Illinois at Chicago
1640 W. Roosevelt Road
Chicago, Illinois 60608

PHONE: (312)994-1468
996-1567

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Illinois at Chicago

DIRECTOR: Arnold J. Sameroff
OTHER STAFF TITLES: special educator, occupational therapist, prespeech and feeding specialist, parent program coordinator, social worker, evaluator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 24 handicapped children under age 3 years and their mothers, fathers, and grandparents. The families are from economically disadvantaged minority populations. Referrals are primarily from hospital high-risk follow-up programs.

PROGRAM FOR CHILDREN:

Children are in a center-based program one morning weekly. Groups of six children and their mothers are served by a transdisciplinary team that provides therapeutic activities in a play context. Motor and educational programs are delivered in areas of gross-motor, fine-motor, language, social-emotional, and cognitive functioning. Interventions using videotape analyses attempt to improve interactions between the parent and the child.

MEASURES OF CHILD PROGRESS:

Children are assessed with the Bayley Scales of Infant Development, Uzgiris-Hunt Ordinal Scales, Carolina Record of Infant Behavior, and the Chicago Infant Neuromotor Assessment at intake and at graduation for pre- and post-program measures. Systematic records are kept of goals and progress on childrens' individual education plans.

PROGRAM FOR PARENTS:

The parent is trained to be sensitive to emotional and communication activities of the child while providing educational and motor therapy in a play context. Weekly support group meetings are provided for mothers; fathers and grandparents are integrated into the support group when they are active participants in child care. Special activities are provided for teenage mothers. Parent evening meetings, a library for parents, and a toy library augment the weekly program. Mothers are assessed at entry and exit from the program on a child acceptance scale, an anxiety measure, social support systems measure, self-esteem measure, and a concepts of development scale.

FEATURES AND PRODUCTS

The major feature of the project is the emphasis on parent participation in the developmental progress of the child. The parent is trained at three levels: (1) to deliver educational and motor therapy to the child, (2) to be sensitive to and appreciative of the communicative and emotional feedback of the child, and (3) to be aware of their own attitudes and emotions toward the child.

Project LETS

A Model Program for Longitudinal Evaluation and Therapy Services

ADDRESS:
David T. Stiegal Institute
Michael Reese Hospital and Medical Center
3033 South Cottage Grove Avenue
Chicago, Illinois 60616

PHONE: (312) 791-2900

YEAR OF FUNDING: 1

FISCAL AGENCY: Michael Reese Hospital and Medical Center

DIRECTOR: Diana Pien
OTHER STAFF TITLES: teacher, social worker, audiologist, secretary, pediatrician, pediatric neurologist, pediatric nurse practitioner, occupational therapist, physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 18 hearing-impaired infants who also have emotional problems, developmental delay, neurological or orthopedic disorders, epilepsy, cerebral palsy, mental retardation, chronic illness, or visual impairments. Economically disadvantaged minority infants are of special concern to the project.

PROGRAM FOR CHILDREN:

The project identifies multihandicapped hearing-impaired infants. During a six-month intervention/diagnostic teaching phase, a project staff member visits each infant and family one to three times weekly. At the end of this period, the project identifies goals and methods for promoting the infant's communication skills and for strengthening the parent-child relationship. The infant and family are then referred to a follow-up placement. During the next year, the project provides audiologic and medical care, counseling, parent support, inservice workshops, and monitoring of child and family progress.

MEASURES OF CHILD PROGRESS:

Most children are evaluated upon referral, at program exit, and at 12 months following program exit. The Bayley and Gesell Scales, the Uzgiris-Hunt, the Vineland, and videotapes of the parent and child interacting are for assessment. Project-developed procedures are used to rate the pragmatic, semantic, and conversational turn-taking communication skills of the children.

PROGRAM FOR PARENTS:

The project tries to help each family understand their child's diagnosis and prognosis and actively participate in the treatment plan. The project offers educational lectures, genetic counseling, individual and group counseling, and sign language and communication skills classes. Family members attend all diagnostic teaching intervention sessions.

FEATURES AND PRODUCTS:

The project proposes to publish a detailing of risk factors for multiple handicaps and hearing impairments, a list of criteria for determining the educational significance of handicapping conditions, a data base form for recording and organizing data from multifaceted evaluations, and a document outlining predictions of longitudinal assessment data.

Project ACTT

Activating Children Through Technology

ADDRESS: 27 Horrabin Hall
Western Illinois University
Macomb, Illinois 61455

PHONE: (309) 298-1634

YEAR OF FUNDING: 1

FISCAL AGENCY: Western Illinois University

DIRECTOR: Patricia L. Hutinger
OTHER STAFF TITLES: computer coordinator/adapter, child development computer specialists, programmer/adapter, trainer/programmer, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 50 children from birth to age 6 years who have moderate to severe structural and functional handicapping conditions. Families are viewed as partners with the project staff.

PROGRAM FOR CHILDREN:

The ACTT microcomputer curriculum intervention model for handicapped children includes hardware, peripherals, adaptations of existing equipment, and software development. The project operates two classrooms on the Western Illinois University campus, three satellite centers, and a mobile unit from which home visits are possible. Each child participates in a weekly intervention session. With computers and adaptive peripherals, children can interact with their environment in ways which were not possible before. Goals and objectives for ACTT infants are derived from the Brinker and Lewis Piagetian-based Contingency Intervention Curriculum and from the Macomb 0-3 Core Curriculum. The preshcool curriculum includes goals and activities based on a survey of curricula including the use of LOGO; existing learning environment software which may be adapted for individual children; and software developed by Project ACTT staff, teachers, and parents.

MEASURES OF CHILD PROGRESS:

The impact of the child's participation in the microcomputer curriculum is measured with the Adaptive Performance Instrument, the Uniform Performance Assessment System, and the Sequenced Inventory of Communication Development. These insturments are used prior to beginning intervention and at six-month intervals thereafter. An observation tool, the B.I.T. (Behavior Interaction Tool for Child/Adult/Computer) is being developed.

PROGRAM FOR PARENTS:

Fathers and mothers are encouraged to participate in the intervention sessions. The project offers other activities for parent involvement such as parent meetings, program planning, and evaluation.

FEATURES AND PRODUCTS:

Project ACTT plans to produce manuals and software and make them available to professionals. Dissemination of the model project to other school districts and agencies will take place during the second and third years of funding.

RIEP

Rural Infant Education Program

ADDRESS:
Wabash & Ohio Valley
Special Education District
Box E
Norris City, Illinois 62869

PHONE: (618) 378-2131

YEAR OF FUNDING: 3

FISCAL AGENCY: Norris City-Omaha CU#3

DIRECTOR: Lawrence Eno
OTHER STAFF TITLES: early childhood teachers, program aides

CHARACTERISTICS OF TARGET POPULATION:

Project staff members, with local public school personnel and special education cooperative staff, screen up to 1800 children from birth to age 6 years for vision, hearing, speech and language, cognitive, and fine-and gross-motor skills. The project directly serves 30 to 40 children birth to age 3 years who are determined through medical, psychological, environmental, and educational assessment to be at risk in terms of their physical, cognitive, language, sensory, or social/motivational development.

PROGRAM FOR CHILDREN:

Each child receives an individualized education plan (IEP) with performance objectives selected from RIEP's own Early Childhood IEP curriculum. Activities for these plans are selected according to need from the Small Wonder Performance Objectives for Preschool Children, the Developmental Programming for Infants and Young Children, the Uniform Performance Assessment System, the Learning Accomplishment Profile, and RIEP's own Narrative Curriculum. Supplemental services (psychological, social, audiological, speech and language, physical therapy) are provided with the Wabash & Ohio Valley Special Education District. Monthly sharing centers, where children can meet in small groups, are used to supplement home instruction.

MEASURES OF CHILD PROGRESS:

The project measures child progress with the Alpern-Boll Developmental Profile, the Bayley Scales of Infant Development, the Peabody Picture Vocabulary Test--Revised, the McCarthy Scales of Children's Abilities, and the Brigance Inventory. Pre/post scores are available on the Brigance. Criterion-referenced tests and observations of children and interactions between the child and parent are also used for assessment purposes.

PROGRAM FOR PARENTS:

Parents receive training and are directly involved in home-based activities as primary interventionists. Parent information, counseling services and family psychological and social services are available. Parents are involved in ongoing planning and evaluation. A questionnaire is used to measure parent satisfaction.

FEATURES AND PRODUCTS:

One of the features of this project is the incorporation of screening services and instruction in the same relatively low-cost model. Products of the Rural Infant Education Program include the following: RIEP Procedures Manual, RIEP Early Childhood IEP Curriculum, RIEP Narrative Curriculum, and the RIEP Preschool Screening System.

An Early Childhood Model Program for Handicapped Children Residing in Rural Environments

ADDRESS: CITH
2805 East 10th
Bloomington, Indiana 47401

PHONE: (812) 335-9771

YEAR OF FUNDING: 1

FISCAL AGENCY: Indiana University Foundation

CO-DIRECTORS: Herbert J. Rieth and Pamela R. Terry
OTHER STAFF TITLES: evaluator, curriculum specialist, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 8 years who reside in outlying rural areas and who have been identified as handicapped according to federal rules and regulations. Staff members expect that most of the children served will be age 3 to 5 years. Ten to 15 children will be served during the first funding year.

PROGRAM FOR CHILDREN:

The program for children during the first year of funding consists of one classroom which serves as a self-contained instructional center for one group of children and as a resource room for another group of mainstreamed children. The primary goal of the self-contained program is to prepare mildly and moderately handicapped children for successful placement and maintenance in normal settings. The classroom uses a diagnostic-prescriptive-evaluative model for instruction. Instructional objectives are based on the results of criterion-referenced assessments (the Valett Developmental Survey of Basic Learning Abilities and the Basic School Skills Inventory--Diagnostic). The project has adapted the Ameliorative Curriculum and the Responsive Education Program Curriculum.

MEASURES OF CHILD PROGRESS:

Child progress is measured in the classroom by observations, diagnostic probing, and teaching, recording, monitoring, evaluating, modifying instruction, and teacher self-evaluation. Parents use checklists, parent diaries, tape recordings, and photographs to evaluate children at home. Some norm-referenced instruments are also used to check student progress. Observational data is emphasized, and computer-assisted analysis systems are employed.

PROGRAM FOR PARENTS:

A hands-on program for parents consists of observations, demonstrations, modeling, and application of educational techniques with their children. The project also provides some consultations and long-term training. Health, legal, social, medical, and education agencies collaborate to provide needed support services.

FEATURES AND PRODUCTS:

The project will establish a state-wide network of model service centers that provide uniformly high-quality programs, investigate the utility of microcomputers to manage individual education plans, and monitor the efficacy of student instruction.

Lawrence Early Education Program

ADDRESS: Lawrence Early Education Program
1837 Vermont
Lawrence, Kansas 66044

PHONE: (913) 841-8463

YEAR OF FUNDING: 3

FISCAL AGENCY: Lawrence Unified School District #497 Special Services

DIRECTOR: Janet Wedel

OTHER STAFF TITLES: occupational therapists, speech therapists, program assistants, secretaries, classroom coordinators

CHARACTERISTICS OF TARGET POPULATION:

The project screens children birth to age 5 years. The classrooms serve children age 30 months to 5 years. Handicapping conditions include learning, communication, hearing, and visual impairments; mental retardation; autism; physical handicaps; and severe multiple impairments.

PROGRAM FOR CHILDREN:

The project uses community resources and two special classrooms to provide a continuum of services for children and their families. A centralized child intake and monitoring system is used to screen, evaluate, place, monitor, and reevaluate children who receive services. Children placed in the special classrooms receive intensive individual treatment based on incidental teaching and generalization strategies.

MEASURES OF CHILD PROGRESS:

The project staff members measure child progress with a battery of standardized tests given twice yearly and behavioral observations specified in each child's individual education plan (IEP).

PROGRAM FOR PARENTS:

Services for parents are provided on community, classroom, and individual levels. Parents are directly involved in the development and implementation of their children's IEP. Individual parent training is available at the center or at home upon request, and parent training workshops are provided by several community agencies.

FEATURES AND PRODUCTS:

The project's features include a centralized screening, evaluation, placement, and monitoring system; a cooperative interagency approach; and a continuum of least restrictive services. Products include a slide show, a continuum-of-services resource guide, brochure, growth chart, booklet on developmental milestones, workshops, journal articles, and a handbook for developing community-based early childhood education systems.

PREP-EDD

Parsons Regional Early Intervention Program

ADDRESS: Bureau of Child Research
Parsons Research Center
Parsons, Kansas 67357

PHONE: (316) 421-6550
ext. 395
YEAR OF FUNDING: 2

FISCAL AGENCY: University of Kansas

DIRECTOR: Lee Snyder-McLean
OTHER STAFF TITLES: coordinator, preschool teacher, infant specialist, speech-language therapist, physical therapist, paraprofessional staff

CHARACTERISTICS OF TARGET POPULATION:

Children served by the project range in age from birth to five years, and are dispersed across a nine-county area. Children are diagnosed as having a specific handicapping condition or are referred by a physician as being at significant risk for development of handicapping conditions. It is estimated that approximately 67 children will be served during the course of the project.

PROGRAM FOR CHILDREN:

The project serves children in a rural area and offers a variety of services, including initial screening, interdisciplinary evaluation, center-based programming, home-based programming, and family-support services. Most children receive services in a combined home-based and center-based program. The curriculum is organized into six skill areas: volitional movement, operational knowledge, symbolic knowledge, dyadic/discourse interaction, expressive communication/language, and receptive communication/language. Programs focus on skills and behaviors which are functional in the child's daily living environment and require active learning on the part of the child.

MEASURES OF CHILD PROGRESS:

Child progress is assessed using the Generic Skills Assessment Inventory as well as a Toddler Specific Skill Competencies or Preschool Specific Skill Competencies checklist. In addition to curricululm assessments, each child's functioning is routinely assessed by a speech/language therapist, a physical therapist, and a psychologist. Norm-referenced measures include the Developmental Profile and the Sequenced Inventory of Communication Development. Also, the project documents the extent to which the child achieves objectives specified in the individual education plan (IEP).

PROGRAM FOR PARENTS:

Each family participates in the assessment and IEP planning process. Plans call for a weekly Home-Carry-Over Activities Packet. Supplementary services also are available such as information services, babysitting, counseling, training, and support groups. Changes in parents will be demonstrated by documenting 1) support services actually requested and used by families, 2) changes in parent/family knowledge and competencies, and 3) changes in family attitudes.

FEATURES AND PRODUCTS:

Features of the model include regional interagency administration, a flexible service delivery system, a multidimensional comprehensive curriculum, and use of microcomputer technology to facilitate tasks such as child care monitoring, IEP management, and child performance tracking.

Interchange: Inter-Reactive Early Child to Adult Exchange

ADDRESS: INTERCHANGE
P. O. Box 548
Winfield, Kansas 67156

PHONE: (316) 221-1200
ext. 419
YEAR OF FUNDING: 1

FISCAL AGENCY: Cowley County Interagency Preschool

DIRECTOR: Ronald R. Pasmore
OTHER STAFF TITLES: case manager, secretary, consultant

CHARACTERISTICS OF TARGET POPULATION:

The project serves infants and young children birth to age three years who are at risk, high risk, or established risk for developmental delay.

PROGRAM FOR CHILDREN:

Parents are trained in Inter-Reactive Language Strategies (INREAL, Weiss, 1981) to deliver services to their infants at home with direction from a case manager. A control group of parents not trained in Inter-Reactive Language Strategies also carries out curriculum-based instructional activities at home with direction from a case manager.

MEASURES OF CHILD PROGRESS:

The developmental progress of the children is measured by administration of several norm-referenced and criterion-based developmental assessment tools. The quality of social interaction between parent and infant is assessed by the Home Observation for Measurement of the Environment (HOME) and other measurements developed by the project.

PROGRAM FOR PARENTS:

Parents in the experimental group are trained by the case manager to use Inter-Reactive techniques during all opportunities for interaction with their children. Parents make weekly videotapes at home and analyze them at the center with project staff members. Control-group parents are trained to teach discreet developmental behaviors. Case managers, who themselves have had no training in INREAL procedures, carry out parent training and monitor child progress.

FEATURES AND PRODUCTS:

This program uses an experimental design with matched experimental and control groups. Only parents in the experimental group are trained in Inter-Reactive Languages techniques. Both groups carry out instructional activities based on their children's developmental needs as determined through an evaluation by an interdisciplinary team of professionals. Service delivery for both groups is transdisciplinary. The program is designed to show that improving social-communicative interaction between parent and infant can affect all of the infant's developmental skill areas. The project's primary goal is to develop the greatest possible level of independence for parents who must provide for the needs of handicapped children.

Infant and Parent Training and Early Childhood Development Program

ADDRESS: Cardinal Hill Hospital
2050 Versailles Road
Lexington, Kentucky 40504

PHONE: (606) 254-5701

YEAR OF FUNDING: 3

FISCAL AGENCY: Cardinal Hill Hospital

DIRECTOR: Linda Dyk
OTHER STAFF TITLES: teachers, social worker, psychologist, nurse, physical therapist, occupational therapist, speech/language therapist, audiologist, neurologist, opthalmologist

CHARACTERISTICS OF TARGET POPULATION:

The program serves 36 children birth to age 5 years with the following handicaps: hydrocephalus, microcephalus, myelomeningocele, cerebral palsy, blindness or visual impairment, deaf/blind, Down's syndrome, or a severe developmental delay in two or more areas.

PROGRAM FOR CHILDREN:

The program for children shifts from a transdisciplinary approach to a modified interdisciplinary approach with three levels: 1) the Infant/Parent Program, for children birth to age 2 years, meets weekly and emphasizes parent training; 2) Developmental I, for children 2 to 4 years chronological age or 1 to 2 years mental age, meets at the center for two half-day sessions weekly (the child attends with one other child, and parents participate once weekly); 3) Developmental II, for children 4 years chronological age or 2 years mental age, meets for five half-day classes weekly (seven children attend this class, and a teacher coordinates team efforts). Each of the three levels of service contains a home-based component.

MEASURES OF CHILD PROGRESS:

The project administers the Early LAP or LAP-D, Alpern-Boll, Cattell, Stanford-Binet, Wisconsin Behavior Rating Scale, and Vineland to all children. Other tests are also used with children with specific identified handicaps.

PROGRAM FOR PARENTS:

The project uses the Minnesota Childhood Development Inventory and the Cardinal Hill Early Assessment of Parents (CHEAP) to assess parents' needs in the areas of child development, legal issues, social services, and behavior management. Individual education plans for parents are developed by project staff members, and parents receive assistance through counseling, group meetings, small-group discussions, a parent library, and in a parents-as-teachers program.

FEATURES AND PRODUCTS:

The transdisciplinary to modified interdisciplinary model is a unique feature. The project maintains a close working relationship with two neonatal units to facilitate an early and comprehensive referral system.

Washington County Children's Program

ADDRESS: Washington County Children's Program
P. O. Box 311
Machias, Maine 04654

PHONE: (207) 255-3426

YEAR OF FUNDING: 1

FISCAL AGENCY: Child and Youth Board of Washington County

DIRECTOR: Janet Weston
OTHER STAFF TITLES: supervisor/trainer, first-level supervisors, dissemination/demonstration coordinator, secretary, town-home advisors, bookkeeper, family support specialist, occupational therapist, speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped children birth to age 3 years and their families in rural northeastern Maine. The parents must be willing to be involved and cooperate with programming for their child.

PROGRAM FOR CHILDREN:

The project trains local residents, known as town-home advisors, to provide services to handicapped children and their parents. The project offers a combination home- and center-based program. The home-based facet of the program is designed to meet the specific needs of the child and the parent. On alternate weeks, when home visits do not occur, the parents, children, and staff members participate in a two-hour group session at the center.

MEASURES OF CHILD PROGRESS:

Children's progress is evaluated via formal pre- and post-assessments and through informal observation by town-home advisors, supervisors, resource personnel, and parents. The project uses the Early Learning Accomplishment Profile, the Bayley Scales of infant development, and the Portage Behavior Checklist.

PROGRAM FOR PARENTS:

The project develops an individual education plan (IEP) for each child's primary caregiver. The IEP is based on assessment (using the NCAST Assessment Scales, developed by the University of Washington School of Nursing) of the parent's skills in three areas: feeding, teaching, and the home environment. The parent and town-home advisor work together to develop activities which will improve the parent's skills in areas of weakness. A family support specialist works with the families and project staff members to provide supportive mental health services. Many parents attend parent support and education groups offered by the project.

FEATURES AND PRODUCTS:

The project plans to develop a slide-tape show, newborn nursery kits which explain project services to mothers of new babies, and a collection of information for public awareness. Town-home advisors and parents participate in ongoing public education programs within their communities to increase local understanding of the needs of handicapped children and their families.

Project RURAL

Rural Utilization of Resources to Awaken Learning

ADDRESS:
Project Rural
MSAD #62
Elmwood Road
Pownal, Maine 04069

PHONE: (207) 688-4832

YEAR OF FUNDING: 1

FISCAL AGENCY: School Administrative District #62

DIRECTOR: Irving H. L. Williams
OTHER STAFF TITLES: teacher, secretary, bookeeper/accountant, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves nine to 12 children between the ages of 3 and 5 years. Most children accepted into the program display mild to moderate handicapping conditions (developmental delays; emotional, social, or behavioral problems; physical handicaps; speech or language impairments).

PROGRAM FOR CHILDREN:

The project provides an integrated learning experience in a center-based classroom. The focus of the curriculum is on the development of the child's social, cognitive, and motor skills. Therapeutic sessions are interspersed with opportunities to participate in more traditional preschool experiences such as sand and water play, painting, and dress-up. In addition to the individualized classroom experience, handicapped children may participate in other instructional experiences including individual tutorial sessions, specialized small-group instruction, and home-based training.

MEASURES OF CHILD PROGRESS:

Specific goals are set for the children. Children's progress on these goals is measured through observation and anecdotal records. Normative data is acquired using the McCarthy Scales of Children's Abilities. Parent checklists and conferences are also used to evaluate progress.

PROGRAM FOR PARENTS:

Parents are encouraged to use their talents and skills to contribute to the program. Parents may serve as aides in the classroom, make instructional materials, and host parent meetings. Activities for parents are based on identified needs and are provided by a parent support group.

FEATURES AND PRODUCTS:

The project provides written information about the project and contributes to the local school-system's weekly newsletter.

Project PACT

Parents and Children Together

ADDRESS:	South Shore Mental Health Agency 77 B Warren Street Brighton, Massachusetts 02135	PHONE:	(617) 783-7300
		YEAR OF FUNDING:	1

DIRECTOR: Geneva Woodruff

OTHER STAFF TITLES: child development specialist, psychiatric social worker, pediatric nurse, administrative assistant, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 handicapped children birth to age 5 years whose parents are handicapped by alcoholism, drug addiction, or incarceration. Parents must be receiving services for their handicap from an adult agency represented on the PACT board.

PROGRAM FOR CHILDREN:

This project acknowledges that parents' basic needs must be met before they can meet the needs of their children. The project offers direct and transition services to children and their families. The project brings together a board of adult, child, and social service agencies to form a transagency alliance which results in comprehensive, family-focused services. The purpose of the transagency board is to develop a service plan for children and their parents which integrates and coordinates the resources of the agencies represented.

MEASURES OF CHILD PROGRESS:

Rate of developmental growth is determined through the use of norm- and criterion-referenced instruments. Rate of developmental growth at the initial assessment will be compared with the rate of growth at subsequent evaluations six months, one year, and two years after entry into the program. Children birth to age 3 years are assessed with the Bayley Scales of Infant Development and the Hawaii Early Learning Profile. The McCarthy Scales of Children's Abilities and the Michigan Preschool Developmental Profile are used with children age 4 to 6 years.

PROGRAM FOR PARENTS:

Project PACT services are delivered in three phases: first, families receive short-term, intensive, home-based services; second, the families are supported and trained in advocacy skills while they are phased into existing community agencies and educational programs; third, follow-up support is provided to the family while consultation and technical assistance is provided to the accepting agency. The project also offers education and support groups for adult agency staff and parents. These groups follow an adult education model with a curriculum that reflects the needs of the group.

FEATURES AND PRODUCTS:

During the first year of funding, the project plans to develop materials on the specific handicapping conditions of parents and the effects on children. The project also plans to offer training modules and workshops on issues and strategies for working with handicapped children and handicapped parents. A procedures and policies handbook, an outgrowth of this transagency model, will also be published.

Pathways for Children

ADDRESS: Enable, Inc.
3 Randolph Street
Canton, Massachusetts 02021

PHONE: (617) 828-4770

YEAR OF FUNDING: 1

FISCAL AGENCY: Enable, Inc.

DIRECTOR: Dorathy Mullikin
COORDINATOR: Sally Hunt
OTHER STAFF TITLES: educational play therapist, social worker, registered nurse, consultants, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves three distinct populations of children: children birth to age 3 years who are profoundly ill and at home; children age 3 to 8 years who are homebound due to debilitating medical conditions; and children age 3 to 8 years who have a terminal illness but are able to function in a school setting.

PROGRAM FOR CHILDREN:

The program focuses on maximizing each child's developmental potential and increasing the child's ability to cope with death and degenerative disease. Appropriate services are determined by the child's condition and may include educational play therapy and activity support groups. Project staff members work directly with professionals to educate them to better serve dying children and support classmates of dying children.

MEASURES OF CHILD PROGRESS:

Specific behavioral goals are established for each family at intake and are evaluated every six months. Additional measures of progress come from questionnaires which address the following points: 1) teacher involvement and support of the child, 2) family support of the child, 3) community awareness of the need for these services, 4) involvement of the child in ongoing family activities, and 5) maintenance of the child in the least restrictive environment.

PROGRAM FOR PARENTS:

Families receive direct intervention in the form of support groups, resource packets, instruction in management, and resources. All services are aimed at maintaining the child in the least restrictive environment, preparing the family to cope with anticipated changing educational need and services as the child's condition deteriorates, and maximizing choices available to the family.

FEATURES AND PRODUCTS:

Workshops, resource packets, and consultation are provided to educational and health professionals. Resource packets contain relevant information on particular illnesses, the general prognosis, resources for the professional, and a curriculum adaptable to the child. Workshops are also offered for teachers on topics such as curriculum resources, socialization, medical prognosis, behavior management, and death and dying.

ERIN Bilingual Demonstration Project

ADDRESS: ERIN
376 Bridge Street
Dedham, Massachusetts 02026

PHONE: (617) 329-5529

YEAR OF FUNDING: 3

FISCAL AGENCY: ERIN

DIRECTOR: Peter Hainsworth
COORDINATOR: Bonnie Carton
OTHER STAFF TITLES: operation coordinator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 16 to 20 handicapped bilingual children with mild to moderate handicaps compounded by limited English proficiency.

PROGRAM FOR CHILDREN:

Services and curriculum include ERIN (Outreach) program components for bilingual populations, screening, learning environment designs, language and motor skills, and parent involvement.

MEASURES OF CHILD PROGRESS:

Project staff members complete pre-and posttests with the Preschool Screening System (adapted in 15 languages) and other ERIN measures.

PROGRAM FOR PARENTS:

Parents participate in a regular communication exchange with the project.

FEATURES AND PRODUCTS:

The project screens mildly to moderately handicapped children from 15 language and cultural groups.

Infant-Toddler Demonstration Project

ADDRESS: Language & Cognitive Development Center
P. O. Box 270
Jamaica Plain, Massachusetts 02130

PHONE: (617) 522-5434

YEAR OF FUNDING: 1

FISCAL AGENCY: Language and Cognitive Development Center

CO-DIRECTORS: Arnold Miller and Eileen Miller
OTHER STAFF TITLES: child treatment specialist, family treatment specialist, secretary, family advocate

CHARACTERISTICS OF TARGET POPULATION:

The project serves children under age 30 months who exhibit unusual social-emotional behavior patterns and developmental, speech, and language delays of six months or more. Typically, the children have neurological problems, exhibit autistic or autistic-like syndromes, or have experienced severe emotional or environmental deprivation. During the first year, the project will screen 30 children and initiate treatment for ten to 15 children. One-third to one-half of the children served are Hispanic.

PROGRAM FOR CHILDREN:

The project provides screening, identification, and early intervention for children. Individual, one-hour sessions with the parent and child involve intensive cognitive developmental work for the child within the structure of the child's relationship with the parent.

MEASURES OF CHILD PROGRESS:

A therapist tracks the progress of the child and parent at each session and makes detailed assessments quarterly. Project staff members review information from: 1) the parent worker's report of parental response to therapy and observational techniques; 2) the child worker's report on the child's progress; 3) the LCDC Umwelt Scale; and 4) the parents' rating of the program's effectiveness. The LCDC Umwelt Scale, a system for coding the behaviors of children and their parents, is used with the Umwelt Assessment (videotaping of the child in specific situations). Yearly progress is measured using pre and post administrations of various standardized tests including the Uzgiris-Hunt, the Bayley Scales of Infant Development, the Sequenced Inventory of Communication Development, and the HOME.

PROGRAM FOR PARENTS:

Parents are required to help instruct their children and participate in an ongoing support group and a five-session parent education workshop. Parents learn methods of handling their children and gathering data. Parents receive emotional support by attending weekly parent groups, therapy, family advocacy, sibling services, and sign language classes.

FEATURES AND PRODUCTS:

The project plans to develop a booklet for parents and a film that explains early developmental problems.

Detroit's Preschool Hearing-Impaired Support Center

ADDRESS: Goldberg School
1930 Marquette
Detroit, Michigan 48208

PHONE: (313) 898-7200

YEAR OF FUNDING: 1

FISCAL AGENCY: School District of the City of Detroit

DIRECTOR: Kay Gabe
COORDINATOR: Dawn Smith
OTHER STAFF TITLES: teacher, paraprofessional, evaluator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves seven hearing-impaired preschoolers who come from economically disadvantaged backgrounds. Project staff members encourage parents and families to become involved in program services.

PROGRAM FOR CHILDREN:

Children attend a center-based program five days weekly during the school year (39 weeks). The program's curriculum design emphasizes Piagetian concepts and theories with a primary focus on intellectual growth, language development (receptive and expressive), and social maturity. One-on-one language development skills are practiced daily with each pupil. Parents may work in the classroom as aides on a weekly basis.

MEASURES OF CHILD PROGRESS:

The project uses a wide array of methods and tools to assess student progress. The evaluation is objective-referenced and uses both standardized and nonstandardized tools. Standardized tests used include the Gessell Developmental Schedule, the Vineland Social Maturity Scale, the Sequenced Inventory of Communication Development, and the Frostig Developmental Test of Visual Perception. Logs, questionnaires, and checklists are also used to measure goal attainment.

PROGRAM FOR PARENTS:

Parent and family services are a major component of the program. The project offers 14 parent training sessions that deal with topics of interest to parents of hearing-impaired children. The center coordinates supplementary services which complement program goals. A Parents Guild meets monthly to coordinate parent activities and serve as a forum for parents. A Parent Aide Program, which allows parents to participate weekly in the classroom program, teaches parents instructional techniques and skills which can be used at home. Activities for home and school are regularly provided. Parents meet with the teachers four times during the school year to discuss progress on objectives of their children's individual education plans.

FEATURES AND PRODUCTS:

The project offers public seminars to promote awareness.

TRIP

Transactional Intervention Program

ADDRESS: TOTE-Woodhaven School District
Bates Elementary School
22811 Gudith
Woodhaven, Michigan 48183

PHONE: (313) 676-5458

YEAR OF FUNDING: 1

FISCAL AGENCY: TOTE-Woodhaven School District

DIRECTOR: Jacquelyn Pfalzer
COORDINATOR: Jeanine Shubitowski
OTHER STAFF TITLES: teacher/consultants and therapists representing the following specializations: visual impairments, emotional impairments, mental retardation, speech and language, occupational therapy, and learning disabilities

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 100 severely handicapped children birth to age 3 years and their families. Handicapping conditions may include physical handicaps, mental retardation, serious emotional disturbances, and visual or auditory impairments.

PROGRAM FOR CHILDREN:

The project uses a home-based, parent-centered curriculum design. The approach focuses on the interactions between parents and their children. Teachers work each week with parents to help them improve their children's development through effective patterns of parent and child interaction. The curriculum and procedures used are derived from the transactional model of development and seek to improve the child's affective emotional development, social skills, language, and cognitive ability.

MEASURES OF CHILD PROGRESS:

Teachers observe children at weekly meetings and assess individual developmental goals. The project also evaluates the patterns of interaction between the parent and the child. Every three months, parents are videotaped while playing with or teaching their children. A rater evaluates the global dimensions of maternal and child behavior using Likert Scale judgments and the Maternal and Child Behavior Rating Scale. Every six months, teachers evaluate parent and child interaction using the Parent Behavior Progression.

PROGRAM FOR PARENTS:

Parents learn ways of responding to their children which sustain the children's interest, motivation, and curiosity. A teacher works in the home with the parent as a partner and offers support and encouragement, designates appropriate goals, and provides a model of desirable interactions.

FEATURES AND PRODUCTS:

A teacher guide to the transactional curriculum will be developed.

Project Dakota

ADDRESS: Developmental Learning Center, Inc.
750 South Plaza Drive
Mendota Heights, Minnesota 55120

PHONE: (612) 454-2732

YEAR OF FUNDING: 1

FISCAL AGENCY: Developmental Learning Center, Inc.

DIRECTOR: James McCaul
COORDINATOR: Linda Kjerland
OTHER STAFF TITLES: teacher, speech therapist, occupational therapist, teaching assistant, family service counselor, secretary

CHARACTERISTICS OF TARGET POPULATION:

Project Dakota serves families with children from birth to age 4 years who are in need of early intervention services. Children of families served are functioning at a level less than 80 percent of chronological age or have a diagnosed disorder highly correlated with a developmental disability.

PROGRAM FOR CHILDREN:

The project's Interaction Model is designed to promote the optimal development of the child by enabling parents and other caregivers to be as effective as possible in their interactions with their child. An array of services is available: home visits, play groups, counseling, support groups, workshops. Parents and staff members meet to select interactional objectives which constitute an individual program plan (IPP). Objectives center around feeding, organizing, communicating, and motivating.

MEASURES OF CHILD PROGRESS:

Changes in children are documented using the Gesell-Amatruda Developmental and Neurologic Examination and the Bayley Scales of Infant Development. The extent to which program participation results in a child's movement to increasingly less restrictive environments is assessed. Other assessments include the Bobath First Assessment (modified), the Physical Therapy Developmental Assessment, direct handling and observation, the Sequenced Inventory of Communication Development, the Early Learning Accomplishment Profile, the Uzgiris-Hunt Ordinal Scales of Psychological Development and the Vulpe Assessment Battery.

PROGRAM FOR PARENTS:

A program facilitator, drawn from the transdisciplinary team, works directly with a family and coordinates team efforts in regard to that family. For family support and education, the project offers counselor-aid support groups, special events for other family members, groups that focus on specific activities such as music and swimming, social gatherings, instructional groups, and special disability support groups. Changes in interaction between the caregiver and the child are measured by evaluating the extent to which objectives specified in the IPP are met.

FEATURES AND PRODUCTS:

A brochure that describes the project's services will be distributed to potential referral sources. Staff members will also design presentations for tour groups.

Clay County Coordinated Preschool Program

ADDRESS: Clay County Vocational Center
11th Street and 10th Avenue, N
Moorhead, Minnesota 56560

PHONE: (218) 236-5211

YEAR OF FUNDING: 1

FISCAL AGENCY: Clay County Vocational Center

DIRECTOR: Evelyn Lynch
COORDINATOR: Robyn R. Widley

OTHER STAFF TITLES: teachers, speech/language clinician, aide, secretary, consultants, occupational therapist

CHARACTERISTICS OF TARGET POPULATIONS:

The project serves infants and children birth to age 4 years who are handicapped or at risk for handicaps and reside in Clay County. Children have hearing or vision impairments, spinal cord defects, cerebral palsy, recognizable syndromes associated with mental retardation, or a developmental delay in one or more areas.

PROGRAM FOR CHILDREN:

The project offers home-based care with visits to the classroom by the parent and child; regular home visits by staff; infant classroom only; or half-day infant care with one of the first two options above. Goals for children are determined following an assessment of needs.

MEASURES OF CHILD PROGRESS:

All children are assessed with the Uniform Performance Assessment Scale and the Brigance Inventory of Early Development. Other instruments used for assessment are the Carolina Record of Infant Behavior, the Adaptive Performance Instrument, the Carey Infant Temperament Scale, and the Parent Inventory of Child Development in Non-School Environments. All children are reevaluated quarterly. The Goal Attainment Scaling is used to determine the effect of instruction on short-term developmental and behavioral goals.

PROGRAM FOR PARENTS:

Parents help design their children's educational programs and the project's evaluation efforts. The project provides emotional support for parents while helping them develop needed skills and acquire necessary services.

FEATURES AND PRODUCTS:

This project is a cooperative effort of public schools and community agencies to demonstrate quality service to handicapped infants and toddlers in rural areas. This project plans to present workshops on developing interagency coordination.

Choctaw Handicapped Children's Early Education

ADDRESS:	Language Development Model Education Program Mississippi Band of Choctaw Indians Route 7, Box 21 Philadelphia, Mississippi 39350	PHONE: (601) 656-5251 YEAR OF FUNDING: 1
FISCAL AGENCY:	Mississippi Band of Choctaw Indians	

DIRECTOR:	Woodlin Lewis
COORDINATOR:	JoAnne Corley
OTHER STAFF TITLES:	curriculum specialist/staff training coordinator, parent training specialist, parent training aides, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped Choctaw Indian Children birth to age 8 years.

PROGRAM FOR CHILDREN:

The basic structure of the program is a one-day parent training workshop followed by four hours weekly of guided interaction between parent and child. The first effort of the program is directed toward helping parents understand their handicapped child. The goal of the program is to increase the child's language development. Materials collected by the Omaha Pilot Parent Program are used to teach parents to help their children's language development using the Oakland Schools' Reading and Language Program. An adaptation of High/Scope's Parent-Infant Curriculum is used to facilitate language development and reading readiness. Language development classes are centered around teaching and learning traditional Choctaw arts and crafts (sewing, cooking, music, art, woodworking, beading, basketry, weaving). All classes take place on the reservation.

MEASURES OF CHILD PROGRESS:

Child progress is measured using the Peabody Picture Vocabulary Test, the Utah Test of Language Development, the the WRAT, the Minnesota Pre-School Language Scale, the WISC-R, and the Leiter International Performance Scale. Teacher checklists and anecdotal information are used to record changes in child behavior.

PROGRAM FOR PARENTS:

Parents are considered primary educators of their preschool handicapped children and instructional adjuncts of K-3 children. In addition to training parents to teach their children English language skills, the project also refers families for medical, psychological, and social services; provides parent education experiences; organizes support groups; and involves parents in the planning and operation of the project.

FEATURES AND PRODUCTS:

The project serves a unique population of very young children who are native-language dominant, economically and educationally disadvantaged, and live in extreme rural isolation. This project has adapted and blended several existing curricula to make them relevant to Choctaw Indians. The result is a curriculum which helps parents and children increase their capacity to use the English language through the teaching and learning of traditional Choctaw Indian crafts. The project also has available several standardized tests which have been translated into the Choctaw language.

Project LINCS

Linking Infants in Need with Comprehensive Services

ADDRESS: Department of Special Education
515 S. Sixth Street
Columbia, Missouri 65211

PHONE: (314) 882-3741

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Missouri

DIRECTOR: Sandra W. Gautt
OTHER STAFF TITLES: community liaison, product development specialist, home trainer

CHARACTERISTICS OF TARGET POPULATION:

Twenty children under 36 months of age are currently served by the project. All children are from three rural counties and are served by public health, family services, and human development agencies.

PROGRAM FOR CHILDREN:

Children are referred on the basis of age and developmental delay as indicated by the Denver Developmental Screening Test, or potential for delay due to family or environmental conditions. An assessment is performed using the Uzgiris-Hunt Ordinal Scales of Infant Development, NCAST Teaching Scales, and an in-depth social history. Motor or speech and language evaluation is conducted as appropriate. Individual Education Plans are developed on all children using the assessment information. Intervention strategies are designed using outcomes from the Home Observation for the Measurement of the Environment. An activity manual based on a match between the Uzgiris-Hunt Scales and DDST is the major curriculum tool. Children and families are seen at least biweekly by home visitors who have been trained in infant development and infant stimulation techniques. Specialized therapy is secured and delivered by linking families with appropriate community or regional resources.

MEASURES OF CHILD PROGRESS:

The project monitors child progress by the Denver Developmental Screening Test and the Ordinal Scales of Psychological Development. Movement through the various sensorimotor stages is monitored quarterly with the Ordinal Scales administered yearly.

PROGRAM FOR PARENTS:

The parent program trains parents to work directly with their children. A parent education information program on child health and development is provided to target agencies for their use and dissemination.

FEATURES AND PRODUCTS:

The outstanding feature of the project is the linkage service delivery model for use in rural areas. Community and agency analysis strategies and related materials have been developed, and project staff members are available for consultation in these areas. Specific materials developed include a curriculum guide based upon Piagetian and ecological principles, a home visitor training manual, a community analysis workguide, and a descriptive manual.

Blackfeet Rural Early Education Model

ADDRESS:
Napi Educational Services, Inc.
Blackfeet Tribe Head Start
Browning, Montana 59417

PHONE: (406) 338-7370

YEAR OF FUNDING: 1

FISCAL AGENCY: Napi Educational Services, Inc.

DIRECTOR: Mary L. Lyons
OTHER STAFF TITLES: coordinator/occupational therapist, communication disorders specialist, intake manager, home trainers, integrated classroom teacher

CHARACTERISTICS OF TARGET POPULATION:

The project serves handicapped and at-risk Native American children birth to age 8 years who reside on the Blackfeet Reservation in a rural and remote region of northwestern Montana.

PROGRAM FOR CHILDREN:

Children move from a home-based infant component through a center-based Head Start preschool experience and to public schools. Primary is on a home-based stimulation program for children birth to age 3 years. Home trainers share a common cultural background with the families and schedule visits two to four times monthly to present new stimulation activities and work directly with the child and parent. The parent is the child's primary teacher. Mildly to severely handicapped preschoolers are integrated into the Blackfeet Head Start classrooms. The project's integrated classroom provides daily experiences for handicapped children and their nonhandicapped peers in a small-group setting. Parent participation in these classroom is an integral part of program operation. Home-based services are available to children geographically unavailable for Head Start services. Finally, the project ensures appropriate transition as children leave preschool education and enter the public schools.

MEASURES OF CHILD PROGRESS:

Norm-referenced measures, critierion-referenced measures, and clinical and behavioral observations are used to measure progress. Tools and techniques include the DDST, the Bayley, adapted Uzgiris-Hunt Scales, the Sequenced Inventory of Communication Development, Preschool Language Scale, Preschool Language Assessment Instrument, and the Peabody Motor Scales.

PROGRAM FOR PARENTS:

Parents are involved at all levels of project operation and help develop individual education plans. Educational and support activities are offered in individual or group settings based on family need and preference.

FEATURES AND PRODUCTS:

The project features the identification and development of culturally relevant and sensitive aproaches to early childhood special education programming in rural areas. This includes the identification and development of an assessment profile and curriculum, a training plan for rural paraprofessionals, and an effective parent involvement strategy that considers the families' culture.

Early Referral and Follow-up

ADDRESS:	Meyer Children's Rehabilitation Institute 444 South 44th Street Omaha, Nebraska 68131	PHONE:	(402) 559-7451
		YEAR OF FUNDING:	1

FISCAL AGENCY: University of Nebraska Medical Center

DIRECTOR: Cordelia Robinson
COORDINATOR: Barbara Jackson
OTHER STAFF TITLES: medical liaison, clinical psychologist, maternal child health nursing specialist, infant/parent educators, infant evaluators, consultants, physical therapist, occupational therapist, speech pathologist, social worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 70 infants and toddlers (birth to 3 years) who experience long-term hospitalizations (greater than one month) and are identified as handicapped (mental, motor, sensory) or at significant risk for developmental problems.

PROGRAM FOR CHILDREN:

Project staff members identify medical needs and help the family contact their home school district for continuation of services. Information from the Uzgiris-Hunt Ordinal Scales of Psychological Development, the Early Intervention Developmental Profile, informal assessments of functional vision and hearing, and nursing assessments (e.g., Feeding Scale) will be used as appropriate to develop an individual education plan for each child.

MEASURES OF CHILD PROGRESS:

The project measures child progress with norm-referenced, criterion-referenced, and clinical assessments. Instruments include the Brazelton Neonatal Behavioral Scales, the Bayley Scales of Infant Development, Early Intervention Developmental Profile, and the Minnesota Child Development Inventory used at age 3, 6, 9, 12, 18, 24, 30, and 36 months). Progress is also documented by each primary discipline in the developmental domain.

PROGRAM FOR PARENTS:

Participation by parents is an integral part of the curriculum's design. Specific objectives for parent participation are developed cooperatively between parents and their infants' intervention team and are stated as behavioral objectives. The Teaching Skills Inventory will assess parents' skills in using special education techniques.

FEATURES AND PRODUCTS:

The project's early linkage to local school districts expedites the delivery of services to chronically hospitalized infants and toddlers. Products for dissemination will be developed to facilitate the provision of parent mediated, interdisciplinary programs for hospitalized infants and toddlers. Potential materials may include specific training experiences for professional project staff, a format for individual education plans that will be appropriate for hospitalized preschoolers, and tools to assess parent and child progress.

COPING

Children's Optimal Progress In Neurodevelopmental Growth

ADDRESS: Pediatric Rehabilitation Department
John F. Kennedy Medical Center
2050 Oak Tree Road
Edison, New Jersey 08820

PHONE: (201) 548-7610

YEAR OF FUNDING: 1

FISCAL AGENCY: John F. Kennedy Medical Center

CO-DIRECTORS: G. Gordon Williamson and Shirley Zeitlin
COORDINATOR: Margery Szczepanski
OTHER STAFF TITLES: psychologist, occupational therapist, special educator, speech and language pathologist, physical therapist, nurse

CHARACTERISTICS OF TARGET POPULATION:

COPING serves 20 families of children (birth to 3 years) with neuromotor dysfuntion as evidenced by abnormal muscle tone, postural instability, developmental delay, and problems of sensory integration.

PROGRAM FOR CHILDREN:

COPING uses an interdisciplinary team to develop personalized learning plans for each child that emphasize the acquisition of motor control and coping strategies. The curriculum focuses on generating adaptive outcomes that reflect the child's capabilities in all areas of development and help the child to cope effectively with the environment. Children receive services one to three days weekly in a center and or at home.

MEASURES OF CHILD PROGRESS:

An evaluation design, based on a Context, Outcome, and Skill Model, is being developed to measure effective adaptation. A proportional change index will be used to document child progress over time with data from pre- and posttesting on developmental instruments. The level of achievement of objectives in the personalized learning plans will also measure child progress. Assessment instruments include the Coping Inventory, the Early Adaptive Behavior Inventory, the Milani-Comparetti Motor Development Screening Test, the Uzgiris-Hunt Ordinal Scales of Psychological Development, and the Brigance Inventory of Early Development.

PROGRAM FOR PARENTS:

Family involvement is based on individual needs and the parent's ability to cope with stress. Options include discussion groups, individual counseling, educational meetings, home visits, direct participation in the child's program, and respite care for the child when needed. The Self-Rating Coping Inventory is used to assess parents' adaptive behavior.

FEATURES AND PRODUCTS:

The project focuses on the vital relationship of motor control and adaptive coping. Children with neuromotor dysfunction will be helped to develop movement strategies that facilitate more effective outcomes. Methods of video analysis will address these behaviors. A computer-based system will facilitate data management and interagency coordination. Neurodevelopmental screening is offered to disadvantaged young children in the region. Products will include computer software for developing personalized learning plans and managment of child data, the COPING Curriculum, and a family program manual.

PEACH

Public Education for Autistic Children and the Home

ADDRESS: Public School #31
3055 Kennedy Blvd.
Jersey City, New Jersey 07306

PHONE: (201) 574-5841

YEAR OF FUNDING: 3

FISCAL AGENCY: Jersey City Board of Education

CO-DIRECTORS: Henry Przystup and Robert DiTursi
COORDINATOR: Carolyn Gallagher
OTHER STAFF TITLES: special education teachers, teaching assistants, social worker, consulting pediatric psychiatrist

CHARACTERISTICS OF TARGET POPULATION:

The project serves ten autistic children age 3 to 5 years.

PROGRAM FOR CHILDREN:

The curricula focus on developmental skill sequences designed to promote the autistic child's adaptability to his or her environment in the areas of communication, socialization, and self-help skills that foster school readiness. Behavioral techniques are used to implement the program. PEACH operates in an urban public school setting.

MEASURES OF CHILD PROGRESS:

Criterion-referenced measures, drawn from the curricula wherever possible, are used to measure student progress. The curricula include: Perceptual Motor Play Program of the Social Learning Curriculum, the AIM Program for deaf-blind students, and the Lovaas approach to language development. Extensive teacher and parent reports are also used.

PROGRAM FOR PARENTS:

The family training program provides parents with skills in the following areas: nature and needs of the autistic child, behavior modification principles, methods to reduce socially inappropriate behaviors, and techniques for language development. Project staff members provide experiences and training for the family on-site and in the home.

FEATURES AND PRODUCTS:

The project will develop these products: a classroom program handbook, a parent/family/home management handbook, a staff development manual, and videotapes.

Language Interaction Intervention Project

ADDRESS: Medical Education Building CN19
Rutgers Medical School - UMBNJ
New Brunswick, New Jersey 08903

PHONE: (201) 937-7901

YEAR OF FUNDING: 1

FISCAL AGENCY: Rutgers Medical School

DIRECTOR: Michael Lewis
COORDINATOR: Lucille Weistuck
OTHER STAFF TITLES: pediatric trainer, research assistant, speech pathologist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children age 30 months to 5 years. The project trains physicians to screen for children who have emerging language but are exhibiting language delays. The target population includes children that exhibit cognitive and language delay. Project staff members expect that up to one-third of the children will come from families who live at or below the poverty level.

PROGRAM FOR CHILDREN:

The project is designed to train mothers to communicate effectively with their children and to improve their children's communication. Children and mothers receive two hours of programming twice weekly. For the first hour of programming, mothers and children are separated. Mothers are trained in the use of language and application of specific techniques. Children are involved in developmentally appropriate activities with a speech pathologist. During the second hour, mothers are with their children in the classroom observing part of the time and using prescribed techniques while the speech pathologist and the project coordinator watch. Once every two weeks each family is visited at home to ensure that activities used at the center are transferred to the home.

MEASURES OF CHILD PROGRESS:

Evaluation rests primarily on observational measures of changes in responsive and initiative behaviors of mother and child. The specific measures of child communication include the Mother-Child Language Interaction Scale and the child's observed MLU (mean length of utterance). Children are also assessed with a standard psychometric test to determine if the intervention program affected general cognitive performance.

PROGRAM FOR PARENTS:

Mothers participate in biweekly training sessions designed to: 1) increase understanding of principles of early language development; 2) increase understanding of how their own speech contributes to the children's language development; 3) increase ability to map the objects, events, and actions in the children's seeable world; and 4) increase ability to respond contingently to their children's communications. Mothers participate in classroom activities with their children and practice skills and techniques learned in the workshops. Home visits are made to encourage generalization of skills from the classroom to the home.

FEATURES AND PRODUCTS:

A manual will be developed that details the theoretical frameworks of the program, the actual strategies to be used, and the manner in which strategies can be incorporated into daily activities. The manual is designed to be a practical tool for practitioners to use in the classroom.

PIPE Project
Pueblo Infant-Parent Education

ADDRESS:
PIPE Project
P. O. Box 788
Bernalillo, New Mexico 87004

PHONE: (505) 867-3396

YEAR OF FUNDING: 3

FISCAL AGENCY: Southwest Communication Resources, Inc.

DIRECTOR: Norman Segel
COORDINATOR: Ruth Miksovic
OTHER STAFF TITLES: physical therapist, speech and language pathologist, child development specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 25 children birth to age 3 years from seven Pueblo Indian communities in northern New Mexico. The children have a variety of handicaps.

PROGRAM FOR CHILDREN:

The project implements a home-based service model with an interdisciplinary team of community health paraprofessionals and child development professionals. The curriculum is prescriptive and is adapted from the more visually based curriculum materials available (such as Small Wonder, Illustrated Portage--Alsaka, and others).

MEASURES OF CHILD PROGRESS:

Staff members measure child progress with the Bayley Scales of Infant Development every nine months. The Early Learning Accomplishment Profile provides ongoing assessment and is the basis for determining specific training objectives for children. The Bromwich Parent Behavior Progression Checklist is used to assess interaction between parent and child.

PROGRAM FOR PARENTS:

Parents participate in weekly training activities and conferences in the home. Parents also participate in a more formal set of training activities (a six-week parent group) upon their entry into the program. Parent representatives serve on the project's advisory council and also assist staff with community liaison and education activities.

FEATURES AND PRODUCTS:

The project has developed a model for training community-based, Indian health paraprofessionals to serve as facilitators of infant intervention and parent education, thereby enabling the project to provide appropriate bilingual bicultural services. The project has developed parent materials which illustrate Native American child-rearing practices and can be used to stimulate infant development. These products incorporate traditional activities from many tribes and are available to Indian communities throughout the country.

A Continuum of Services in Rural Northern New Mexico

ADDRESS: Las Cumbres Learning Services, Inc.
P. O. Box 1362
Espanola, New Mexico 87544

PHONE: (505) 753-4123

FISCAL AGENCY: Las Cumbres Learning Services, Inc.

YEAR OF FUNDING: 1

DIRECTOR: Patricia Thompkins-McGill
COORDINATOR: Judy Kimmel
OTHER STAFF TITLES: teachers/trainers, paraprofessionals, physical therapist, speech therapist, secretary/bookkeeper.

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 8 years who have a range of handicapping conditions from mild to severe/profound. It is expected that the effects of this project may reach as many as 75 children during the first year of funding. A large percentage of the population served is Hispanic and Native American. The majority of the children served are under age 5 years.

PROGRAM FOR CHILDREN:

There are five program components: 1) a severe/profound classroom and training center; 2) a mainstream classroom; 3) a rural satellite preschool center (with an infant home-bound model); 4) resource support to mainstreamed children; and 5) a resource and materials library. Both classrooms operate from 9 a.m. to noon, one to four days weekly. Curriculum ideas for the severe/profound class come from the Rivendall Scale, the Carolina Infant Curriculum, Project Transition, and other works which provide sequential programming and assessment methods. The mainstream classroom uses as curriculum guides the Portage Guide to Early Education, the Learning Accomplishment Profile, Brigance Inventory of Early Development, and A Guide for Integrating Handicapped and Non-Handicapped Children. The rural satellite center receives, screens, and assesses referrals; provides direct service; trains personnel; and provides support services. The direct service component follows a home-based model and uses a member of the transdisciplinary team to act as case manager or home programmer. One-hour home visits are scheduled weekly.

MEASURES OF CHILD PROGRESS:

Success on individual objectives and performance on standardized tests of child development are used to measure child progress. Child progress will be calculated using a technique called the Intervention Efficiency Index.

PROGRAM FOR PARENTS:

Families enrolled in the project have access to a bilingual lending library. The project also offers a variety of other services to help parents and families cope with their children's handicap. Parents are encouraged to observe their child at the project, to carry out learning activities at home, and to help plan and evaluate the program. Parents of children enrolled in the home-based program receive training at home.

FEATURES AND PRODUCTS:

Trilingual service capabilities exist. Materials contained in the library or designed for dissemination will be written in Spanish and English.

New Vistas Program for Infants with Special Needs

ADDRESS: New Vistas Program
P. O. Box 2332
Santa Fe, New Mexico 87501

PHONE: (505) 988-3803

YEAR OF FUNDING: 3

FISCAL AGENCY: New Vistas

DIRECTOR: Mary K. Russell
COORDINATOR: Evangelina Moncayo
OTHER STAFF TITLES: early childhood specialists, occupational therapist, speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project offers support services, training, and consultation to community service providers interested in initiating and expanding local services to children with special needs. Project activities have an impact on 53 children birth to age 5 years and their families in eight rural counties in north central New Mexico.

PROGRAM FOR CHILDREN:

The project does not serve children directly. Services to community service providers include: awareness and education regarding the importance and benefits of early intervention services; comprehensive training programs in the New Vistas home-based service delivery model; and consultation and workshops dealing with various topics in the area of early intervention and implementation of programs.

MEASURES OF CHILD PROGRESS:

Project staff members have developed a needs assessment to help rural service providers identify areas of interest and concern. Consultation is provided to help assess the needs of children and families served by these providers. Evaluation programs are set up using the service providers' system. Assessment tools are recommended based on individual needs of a community.

PROGRAM FOR PARENTS:

Parents are recognized as the primary members of the resource team that serves the children. Parents are active participants in workshops provided to community service providers. As members of the parent advisory council, parents are directly involved in project activities in their respective communities and serve as advocates for children with special needs.

FEATURES AND PRODUCTS:

The project has developed and implemented an early childhood service delivery system for rural communities based on an individual community's needs; a comprehensive training package for community service providers who wish to deliver quality service to children with special needs and their families; a parent and professional council to serve as advocates for early childhood services in north central New Mexico; a procedures manual for providing home-based services; and a procedures manual for innovative methods of providing quality rural-based services.

Project VIVA
Viable In-Vivo Assessment

ADDRESS:
Adelphi University
Special Education
Garden City, New York 11530

PHONE: (516) 294-8700

YEAR OF FUNDING: 3

FISCAL AGENCY: Adelphi University

DIRECTOR: Ruth F. Gold
COORDINATOR: Phoebe Lazarus

CHARACTERISTICS OF TARGET POPULATION:

The project serves 40 children who were assessed for in-district placement during a summer diagnostic program. Children are followed in their mainstream settings. Those placed into special education classes are not part of the project.

PROGRAM FOR CHILDREN:

A summer preschool diagnostic program provides an opportunity for in-vivo assessment by a team consisting of a special education teacher, a regular kindergarten teacher, a communication therapist, a psychologist, a nurse-teacher, and two aides. The children attend 9 a.m. to noon for four weeks. The Brigance K-1 is used to assess functioning levels. Additional testing is conducted as needed. Informal evaluation is ongoing.

MEASURES OF CHILD PROGRESS:

Brigance K-1 is administered after the first year.

PROGRAM FOR PARENTS:

Parents meet with team members during the summer program. The team's perceptions and any testing data are shared. The nurse-teacher may suggest out-of-school services which may be needed by the family. The activities parents can use at home are described and suggested. Parent contact continues throughout the school year.

FEATURES AND PRODUCTS:

The project will develop a training manual for teachers of mainstream classes.

Creating Least Restrictive Options

ADDRESS: Jowoni School
215 Bassett Street
Syracuse, New York 13210

PHONE: (315) 479-7744

YEAR OF FUNDING: 1

FISCAL AGENCY: Syracuse University

DIRECTOR: Ellen B. Barnes
OTHER STAFF TITLES: consulting teacher, language consultant, parent counselor, secretary, consultant,

CHARACTERISTICS OF TARGET POPULATION:

The children are autistic or severely emotionally handicapped. Children age 3 to 5 years attend the demonstration classroom, and children age 3 to 7 years attend the consultation component.

PROGRAM FOR CHILDREN:

The project operates a model mainstreaming program with two classrooms that serve 12 to 15 students each. Each classroom has a ratio of two normal children to one child with special needs. A speech and language therapist is involved daily in direct work with the children. Other support services are available. The consultation component of the project helps place children into mainstreamed classrooms by consulting with parents and administrators, working with the classroom teacher, providing crisis intervention, and introducing materials on integrated programming for teachers and administrators.

MEASURES OF CHILD PROGRESS:

Children's developmental progress is measured with techniques outlined in the Developmental Therapy Curriculum. The effects of integration on social interaction is assessed with the Systematic Whom to Whom Notation System (an observational system) and by videotaping the children's actual interactions and behaviors.

PROGRAM FOR PARENTS:

Parents are invited to participate in parent groups and community workshops. Parents may also receive home and in-school training and intensive consultation.

FEATURES AND PRODUCTS:

The project offers two community workshops on mainstreaming and plans to offer a field-based seminar on teacher behaviors that help integrate handicapped and nonhandicapped children. The project will develop manuals on mainstreaming and related topics for administrators, teachers, and parents.

Project Sunrise

ADDRESS: Family, Infant, and Preschool Program
Western Carolina Center
200 Enola Road
Morganton, North Carolina 28655

PHONE: (704) 433-2661
433-2865

YEAR OF FUNDING: 1

FISCAL AGENCY: University of North Carolina at Charlotte

DIRECTOR: Carl J. Dunst
OTHER STAFF TITLES: project coordinators, parent trainers, project evaluator, clerk typist, interdisciplinary assessment team

CHARACTERISTICS OF TARGET POPUALTION:

The project serves 24 to 30 mildly to profoundly handicapped children and their parents. The children range in age from birth to 6 years and have handicaps which include speech, hearing, vision, orthopedic, and other health impairments. Children who are deaf/blind or otherwise multihandicapped are also served.

PROGRAM FOR CHILDREN:

The project operates four center-based parent cooperative preschools in rural western North Carolina. Each center serves eight children and is open two half-days weekly, year-round. Parents work in the classrooms as teachers. The classroom program targets communication and language skills, self-help skills, gross-motor behavior, fine-motor and manipulation abilities, social interaction skills, and cognitive abilities. A major focus is the children's interactions with adults, peers, and inanimate objects.

MEASURES OF CHILD PROGRESS:

Interdisciplinary assessments are conducted upon entry into the program and at yearly intervals thereafter. Overall progress is assessed via the Bayley; Stanford-Binet; Uzgiris-Hunt; McCarthy; Vineland; SICD; and gross-, fine-, and adaptive-motor scales yeilded from physical therapy assessments. Ongoing progress is monitored using developmental checklists adapted from the Griffiths Mental Development Scales and the Uzgiris-Hunt. Specific progress is measured using project-developed behavior monitoring routines.

PROGRAM FOR PARENTS:

Parent trainers teach parents basic child care, intervention, and behavior monitoring routines. These routines are designed to give parents the necessary skills and competencies to provide high-quality care for their children, to enhance the children's behavior and development, and to measure the extent to which the children acquire target behaviors. Parents help with teaching; keeping records; and opening, closing, cleaning, and maintaining the center. Workshops are provided for parents and siblings of the handicapped children on issues relevant to life with a handicapped child.

FEATURES AND PRODUCTS:

Project Sunrise is a co-op program and has produced the Operations and Management Guide which describes methods and procedures for establishing co-op programs and procedures used to train parents to implement basic child care, intervention, and behavior monitoring routines.

First Years Together

ADDRESS: First Years Together
501 S. Boylan Avenue
Raleigh, North Carolina 27603

PHONE: (919) 755-6935

YEAR OF FUNDING: 1

FISCAL AGENCY: Wake County Public School System

DIRECTOR: Lanelle Taylor
OTHER STAFF TITLES: assessor/intervenor, infant/parent resource specialist, family counselor, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves high-risk infants from birth to age 3 years. The infants are premature and have been hospitalized in the local neonatal intensive care unit for at least two weeks and have not been diagnosed as having cerebral palsy or other serious brain damage. At least 50 percent of the children come from low-income families who depend on public support. A minimum of 40 families and infants will be served.

PROGRAM FOR CHILDREN:

The project follows the Assessment-as-Intervention Model. In this model, the developmental assessment of an infant focuses on an exchange of observations between a parent and professional such that the assessment process itself becomes an intervention affecting a parent's child-rearing attitudes, beliefs, knowledge, and behavior. A total of ten assessment intervention sessions with parents and infants begins in the hospital before discharge and ends 18 months later.

MEASURES OF CHILD PROGRESS:

The Brazelton Neonatal Behavioral Assessment Scale is administered during the first three assessment sessions. Two months after hospital discharge, when the Brazelton is no longer appropriate to describe infant behavior, the Bayley Scales of Infant Development is used. The Cattell Scales of Infant Development is used to document developmental status at age 12 and 24 months.

PROGRAM FOR PARENTS:

Parents are involved on four levels. First, a group of parents advises staff members involved in overall project planning. Second, parents serve as primary intervenors with their child. Third, parents serve as evaluators, both of their own progress and of the overall program. Finally, parents participate in demonstration and dissemination activities. Individual counseling is provided on request for all families. The project measures these outcomes for parents: attitudes, values, and beliefs about parenting and development; knowledge of infant development; parental focus of control; and sense of personal well-being. Other parent outcomes will be designed and field-tested throughout the course of the project.

FEATURES AND PRODUCTS:

At least 20 public health nurses will be trained in the Assessment-as-Intervention Model. For the first several months, each nurse accompanies an individual assessor/intervenor on home visits. At first, the nurse is an observer. Gradually the involvement increases until the nurse takes full responsibility for implementing assessment intervention procedures. A resource room for families will be available.

VIPP

Volunteers in Partnership with Parents

ADDRESS: Developmental Evaluation Clinic
210 W. Liberty
Williamston, North Carolina 27892

PHONE: (919) 792-6989

YEAR OF FUNDING: 1

FISCAL AGENCY: East Carolina University

DIRECTOR: Linda Nelson
OTHER STAFF TITLES: head teacher, paraprofessional, coordinator of VIPP advisors, clerk/typist, cook

CHARACTERISTICS OF TARGET POPULATION:

The project serves moderately, severely, profoundly, and multiply handicapped children under age 6 years and their parents. The families live in rural areas.

PROGRAM FOR CHIDREN:

Services for children take place both at home and in the center. Children under age 2 years come to the center one to four half-days weekly. Children between the ages of 2 and 5 years attend four days weekly. Project staff members reserve a full day each week for home visits, staff evaluation, conference planning, or in-service meetings. A developmental, cognitively oriented, behaviorally implemented instructional approach is used. Teachers and paraprofessionals have primary responsibility for direct intervention with children. The curriculum is based on the Carolina Curriculum for Handicapped Infants, the Portage Guide to Early Education, and the Guide to Early Developmental Training.

MEASURES OF CHILD PROGRESS:

Baseline information on the child is established during multidisciplinary assessment carried out by the team members at the clinic. Follow-up evaluations are completed every six months. Criterion-referenced tools, including the Carolina Record of Infant Behavior and the Uniform Performance Assessment System, are used for ongoing evaluation of the children's progress.

PROGRAM FOR PARENTS:

Parents and their partners receive formal and informal instruction in normal child growth and development, behavior management, cognitively oriented stimulation activities, and caregiving skills. Parent support groups meet to provide emotional support.

FEATURES AND PRODUCTS:

A unique feature of this project is the use of family members, specifically grandmothers, who serve as "partners." These partners are trained along with the parents to provide support to the parent and quality respite care. The project plans to produce two documents, the VIPP Volunteer Handbook and VIPP Implementation Manual, that will provide the information other rural early intervention projects will need in order to adopt the VIPP model.

A Social Communicative Intervention Model

ADDRESS: Children's Hospital Medical Center of Akron
281 Locust Street
Akron, Ohio 44308

PHONE: (216) 379-8256

YEAR OF FUNDING: 1

FISCAL AGENCY: Children's Hospital Medical Center

DIRECTOR: Philippa Campbell
OTHER STAFF TITLES: parent/programming coordinator, validation specialist, clinic coordinator, psychologist, psychological assistant, speech and language pathologist, intervention coordinator, NDT therapist, intervention specialists, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves term or near-term infants who have suffered from asphyxia with subsequent clinical evidence of hypoxic encephalopathy. Over the course of three years, the project will serve thirty children.

PROGRAM FOR CHILDREN:

The three-year curriculum has four phases and attempts to develop competence in social communication. Phase I, Primary Caregiver/Infant Interaction (one-hour weekly, increased as needed), focuses on physical readiness for communication and play dialogue. Phase II, Intentional Nonverbal Communication (one hour four times weekly), attempts through individual and group treatments to help the child demonstrate nonverbal communication. Phase III, Initial Verbal (Symbolic) Intervention Phase, attempts to establish a core vocabulary of ten words. Phase IV, the Expanding Verbal (Symbolic) Skills Phase, focuses on the establishment of multi-word combinations.

MEASURES OF CHILD PROGRESS:

The Als (1982) Monadic Scoring System for Interaction Involvement and videotapes of sessions are used to evaluate child behaviors. Developmental assessments are conducted every six to twelve months using the Brazelton Neonatal Assessment Scales, the Bayley Scales of Infant Development, and through neurological and medical assessments. The Learning Accomplishment Profile will be used informally.

PROGRAM FOR PARENTS:

An individualized family plan is developed and training tries to inform families about handicapping conditions, help parents be therapeutic agents, help parents obtain services from outside agencies, and help parents develop skills to cope with the stresses of rearing a handicapped child.

FEATURES AND PRODUCTS:

A close collaborative relationship with the neonatal intensive care unit will serve as a resource as the project attempts to develop, validate, and replicate an interagency service delivery model.

TEACH Project

Training and Educational Assistance for Children with Handicaps

ADDRESS: South Gate School
3041 Cleveland Avenue
Canton, Ohio 44707

PHONE: (216) 357-9043

YEAR OF FUNDING: 1

FISCAL AGENCY: Stark County Board of Mental Retardation and Developmental Disabilities

CO-DIRECTORS: Larry Muschkat and Ken De Paola
OTHER STAFF TITLES: teacher, instructor assistants, language specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 95 preschool children birth to age 6 years who have substantial developmental disabilities according to the rules established by the Ohio Department of Mental Retardation and Developmental Disabilities.

PROGRAM FOR CHILDREN:

The project provides a comprehensive multidisciplinary program for handicapped preschool children in settings integrated with nonhandicapped peers. Infants and their parents receive one hour of training weekly, focusing on the sensorimotor development of the child. Toddlers attend a half-day integrated program based on the Uzgiris-Hunt Ordinal Scales of Psychological Development. The preschool program operates five days weekly during the regular school year. The curriculum used in the preschool classroom focuses on the development of skills which are critical to success in a mainstream environment. The children begin the program in self-contained special preschool classrooms located in a regular public school. Gradually, students are mainstreamed into existing classes for nonhandicapped children.

MEASURES OF CHILD PROGRESS:

The Early Learning Accomplishment Profile is used weekly to assess the progress of infants enrolled in the program. Toddler progress is determined daily using the Uzgiris-Hunt. The progress of children enrolled in the preschool program is compared weekly against criterion-referenced measures. The children's growth in adaptive behavior is assessed using the Preschool Attainment Record and the Coping Analysis Schedule for Educational Settings.

PROGRAM FOR PARENTS:

Parents of children in the infant or toddler component are required to participate. The project provides daytime respite care for children so that parents can attend weekly workshops and training sessions which include a nine-month series on behavior management, social learning theory, human growth and development, and personal growth and development. Parents of children enrolled in the preschool component receive similar services, with the exception of respite care.

FEATURES AND PRODUCTS:

The project conducts community awareness and child identification programs.

Branching Out

ADDRESS: United Labor Agency's
Child Care Center
776 Mentor Avenue
Painesville, Ohio 44077

PHONE: (216) 357-9043

YEAR OF FUNDING: 3

FISCAL AGENCY: United Labor Agency, Inc.

DIRECTOR: Joan Hanson
COORDINATOR: Deborah Gluyas
OTHER STAFF TITLES: classroom teachers, classroom aides, therapy aide, speech-language therapist, psychologist, administrative assistant

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 children age 18 months to 8 years. Handicapping conditions range from mild to severe and are varied in nature. Parents' work requirements necessitate full-day or extended-day services for the children.

PROGRAM FOR CHILDREN:

All children are integrated into preschool classes which provide opportunities for individualized and group learning experiences and implementation of individual education plans (IEP) within the context of the day-care classroom. The approach is cognitive based and uses the Nisonger Center's File of Infant Stimulation and a modified High/Scope Curriculum.

MEASURES OF CHILD PROGRESS:

The project uses the Minnesota Child Development Inventory to screen children at program entry. Further educational assessments are made using the Uniform Performance Assessment System (UPAS) which serves as the primary foundation for IEP development. In-depth assessments in speech, hearing, occupational therapy, and physcial therapy are made as needed. Pre- and posttest UPAS data serve as a program evaluation measure.

PROGRAM FOR PARENTS:

The project provides information and assistance concerning legal issues and helps parents when they move their children to the next educational setting. Parents participate on the advisory council, in a parent support group, in fund-raising activities, in conferences, and as resource persons for the classroom.

FEATURES AND PRODUCTS:

A series of program development papers are being printed for dissemination to other programs. Training modules and a videotape promoting the integration of special children in day-care settings are being developed.

Old Mill School and Linn-Benton Community College Project

ADDRESS:
Old Mill School
532 NW 8th Street
Corvallis, Oregon 97330

PHONE: (503) 757-8068

YEAR OF FUNDING: 3

FISCAL AGENCY: Linn-Benton Community College

DIRECTOR: Mary Spielde
COORDINATOR: Bev Larson
OTHER STAFF TITLES: head teacher, teacher, outreach coordinator, occupational therapist, counselor, speech therapist.

CHARACTERISTICS OF TARGET POPULATION:

The project serves 45 children and their families in mainstream environments. The children are age 30 months to 5 years and represent all types of disabilities.

PROGRAM FOR CHILDREN:

The project offers an urban, center-based program for either three mornings or three afternoons weekly. Instructional sessions (2 and one half hours) include individual and small-and large-group activities. Experiential learning activities have been developed in the developmental areas of language, cognitive, fine-motor, and gross-motor skills. Curriculum activities are developed to give children experiences which will help them acquire target skills as outlined on curricululm cards. Procedures are specific enough to give adequate information to parents and volunteer aides and flexible enough to allow the activity to be adapted to the materials available, to children's needs, and to teaching styles. Objectives and accompanying activities are appropriate for nonhandicapped as well as mildly and moderately handicapped children age 2 to 6 years.

MEASURES OF CHILD PROGRESS:

Project staff members measure child progress with the Alpern Boll Developmental Profile and individual professional diagnostic tests. Following each session, staff members record information relevant to the children's individual education plans. Videotapes and observational measures are also used to measure the children's development.

PROGRAM FOR PARENTS:

Parent education meetings are held bimonthly. Each parent works with his or her child and other children in the classroom. These sessions may be videotaped and discussed with the parent. Each parent participates in developing his or her own goals, and some parents may receive home activities and counseling services. Parents also participate on the advisory council.

FEATURES AND PRODUCTS:

The project has developed the Preschool Interactive Curriculum for the Natural Integration of Children. This curriculum will enable traditional preschool and daycare programs to effectively integrate mildly and moderately handicapped children. The curriculum is designed to be used in small mainstreamed groups (three to five children). It includes developmental objectives and corresponding activities. The curriculum teaches skills through modeling, activity, and interactional procedures. Children can learn from each other, the adult, and their own exploration and involvement.

En Trans

ADDRESS: Teaching Research Division
Oregon State System of Higher Education
345 North Monmouth Avenue
Monmouth, Oregon 97361

PHONE: (503) 838-1220
ext. 401

YEAR OF FUNDING: 1

FISCAL AGENCY: Oregon State System of Higher Education, Teaching Research Division

DIRECTOR: Lynn Blair-Thomas
OTHER STAFF TITLES: teacher, teaching assistant, program coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 children age 4 to 5 years in the preschool program and five children age 5 to 7 years in the public school programs. The Cripple Children's Division diagnoses the children as being developmentally delayed (handicaps include severe, moderate, and mild retardation; multihandicaps; autism; emotional disturbance; and language delay).

PROGRAM FOR CHIDLREN:

The project has developed an early education model for transition and follow-through to help existing preschool programs, parents, and local education agencies successfully integrate and maintain the handicapped child in a public school setting. The transition process begins a year before the child is placed in a regular class. During that time, the natural rates and types of responses within the receiving environment are assessed, and these rates serve as target behaviors. Nonhandicapped peers serve as models and reinforcing agents as the project uses systematic strategies to promote generalization to the new environment. Once the child is integrated into the regular classroom, project staff members assist the regular classroom teacher as necessary.

MEASURES OF CHILD PROGRESS:

Progress is measured in terms of the acquisition and generalization of trained skills within the preschool and the transitional environment. Student progress data are collected on a daily basis. Generalization probes are conducted on a weekly basis concurrent with training. The Student Progress Record and the Learning Accomplishment Profile are used to measure long-term progress.

PROGRAM FOR PARENTS:

The major purpose of the parent program is to train parents in skills that will help the successful movement of their children into regular kindergarten or first grade class. The project trains parents to teach their children transitional skills that are appropriate in the home and school and to use generalization techniques and probes to facilitate generalization into the home. Staff members develop topical training materials that are specific to child and parent needs. Staff members also train siblings to provide models, interactional techniques, and consequences to the child.

FEATURES AND PRODUCTS:

Products to be developed by the project include a procedural and training manual to be used by existing preschool models, regular classroom teachers, and parents. The manual will demonstrate an exemplary system for coordinating training and transitions with local education agencies.

Project HAPPY
Helping Achieve Potential of Preschool Youngsters

ADDRESS: Project HAPPY
P. O. Box 328
Allentown, Pennsylvania 18105

PHONE: (215) 820-2051

YEAR OF FUNDING: 1

FISCAL AGENCY: School District of the City of Allentown

DIRECTOR: Lillian M. Kerns

OTHER STAFF TITLES: master teacher, research assistant, aide, parent aide, psychologist, speech/language specialist, special educator

CHARACTERISTICS OF TARGET POPULATION:

The project serves mildly handicapped four-year-olds who have not yet entered school. Handicaps may include learning disabilities, educable mental retardation, developmental delays, language delays, mild emotional disturbances, and social maladjustments. Services are focused on high-risk students who are culturally different or economically disadvantaged.

PROGRAM FOR CHILDREN:

The project operates a school-based program every weekday for two and one-half hours. Every third Friday, staff members conduct in-service workships or meet with parents. The project's comprehensive developmental curriculum contains task analyses of instructional objectives (Brigance Diagnostic Inventory of Early Development) and attempts to synthesize the diagnostic-prescriptive approach with a cognitive developmental Piagetian orientation. The project provides a well-rounded curriculum that emphasizes language and cognitive development.

MEASURES OF CHILD PROGRESS:

Sections of the Brigance Diagnostic Inventory of Early Development are used during initial assessment and later to monitor children's progress over the course of the program. A computer helps analyze data. A certified school psychologist administers more formal measures of progress such as the Stanford-Binet, the Wechsler Preschool and Primary Scale of Intelligence, the McCarthy Scales of Children's Abilities, and the Kaufman Assessment Battery for Children. Children not proficient in English may be administered the Leiter International Performance Scale, the Pictorial Test of Intelligence, and the Hiskey-Nebraska Test of Learning Aptitudes. Speech and language, motor, academic readiness, concept development, and social and behavioral skills are also assessed.

PROGRAM FOR PARENTS:

Parent in-service training is held on alternate weeks. Parents are encouraged to participate in the classroom and are trained to use everyday routines and activities as opportunities for instruction. The project operates a "make-and-take" parent drop-in center which also houses a lending toy library.

FEATURES AND PRODUCTS:

The project uses microcomputer technology for management, instruction, and evaluation tasks. Over the three-year funding period, the project will develop a slide-tape and a video program describing the goals and procedures of Project HAPPY. Workshops will be videotaped and will be made available to the professional community.

Rural KIDS Project

Kindergarten Indentification and Developmental Screening

ADDRESS: KIDS Project
5347 William Flynn Highway
Gibsonia, Pennsylvania 15044

PHONE: (717) 657-5840

YEAR OF FUNDING: 1

FISCAL AGENCY: Pennsylvania Department of Education

DIRECTOR: William F. Ohrtman
COORDINATOR: Ellen Somerton Fair
OTHER STAFF TITLES: master teachers

CHARACTERISTICS OF TARGET POPULATION:

Each spring, the project screens all children in a six-county rural area who will enter kindergarten the next fall. The project's home-based program serves 25 children representing all federally recognized disability categories.

PROGRAM FOR CHILDREN:

Children screened and suspected of having handicaps are assessed, and 25 of the children are enrolled in a summer intervention program. At the end of the summer, children are screened again and special learning needs are identified. The project adapts the regular kindergarten curriculum to meet the special needs, if any, of each child. All children are mainstreamed into regular kindergarten classes. A follow-up progress assessment is later carried out. The summer program is home based and trains the kindergarten teacher or other school personnel and the parent to work together to prepare the child for kindergarten.

MEASURES OF CHILD PROGRESS:

A series of criterion-referenced devices are used to provide baseline data on child performance (Assessment by Behavior Rating, Early Childhood Assessment: A Criterion-Referenced Screening Device, and the Santa Clara Inventory of Developmental Tasks).

PROGRAM FOR PARENTS:

As learners, parents attend workshops and receive other training. As teachers of their own children and as decision makers, parents participate in parent group activities, the advisory council, and program evaluation.

FEATURES AND PRODUCTS:

With the assistance of Fred Rogers and Family Communications, Inc., the project will develop an audiovisual training package for the parents and teachers of handicapped children. Topics will include child development, interaction between the handicapped child and the normal sibling, nutrition, and illness.

Learning Experiences

An Alternative Program for Parents and Preschoolers

ADDRESS: Learning Experiences
201 DeSoto Street
Pittsburgh, Pennsylvania 15213

PHONE: (412) 624-0816

YEAR OF FUNDING: 3

FISCAL AGENCY: WPIC/University of Pittsburgh

DIRECTOR: Phillip Strain
OTHER STAFF TITLES: parent trainers, developmental specialists

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 preschoolers age 3 to 5 years. Six children are developing normally, and six display autistic-like behavior.

PROGRAM FOR CHILDREN:

The 11-month, cost-free program operates five days weekly from 9 a.m. to noon in a local community public school. The classroom component contains academic and social activities typical of a traditional preschool within a highly structured setting. The project uses a systematic design to move children from small-to large-group instruction and to integrate children into free-play settings. A unique curriculum design encompasses individual needs of all students within a group training setting. Normally developing children serve as the intervention agents to improve the social and academic skills of the autistic-like children. Observational data (academic and social settings) is maintained on all children.

MEASURES OF CHILD PROGRESS:

The program administers the Alpern-Boll, McCarthy Scales of Children's Abilities, the Learning Accomplishment Profile, and the Sequenced Inventory of Communication Development. Observational data are collected daily.

PROGRAM FOR PARENTS:

Parents of both populations of children participate in the program in some capacity. Parents of the handicapped population receive instruction in an individualized and core curriculum three mornings weekly. Evaluation is conducted by assessing the effects of parent training on target behaviors of the child and the parent. Nonprogrammable changes in the social functioning of the family are assessed through pre- and post-assessments of stress variables within the family, the family's social contacts, and self-perception. Instruments used are the Community Involvement Checklist, the Beck Inventory, Questionnaire on Resources and Stress. The parent component includes skill training for parents in school, home, and the community to ensure maintenance and generalization of behavior change.

FEATURES AND PRODUCTS:

This program has a strong research orientation. The project is located in a public school building and is collaborating closely with the Pittsburgh public schools. The project trains teachers who receive the children when they leave the center program. Products to date include a core parent curriculum and an instructional design for individualization within a group teaching setting (regardless of the developmental level of the child), and a classroom training module.

PATT Project

Parent and Toddler Training

ADDRESS: Western Pennsylvania School for Blind Children
201 North Bellefield Street
Pittsburgh, Pennsylvania 15213

PHONE: (412) 621-0100

YEAR OF FUNDING: 1

FISCAL AGENCY: Western Pennsylvania School for Blind Children

DIRECTOR: Vince VanHasselt
OTHER STAFF TITLES: social worker, child specialists, secretary, consultant

CHARACTERISTICS OF TARGET POPULATION:

The project serves visually impaired and multihandicapped infants and toddlers birth to age 3 years and their families. The major eligibility criterion is legal blindness or suspected legal blindness as determined through ophthalmologic evaluations. A minimum of 40 families will participate in Project PATT over a three-year period.

PROGRAM FOR CHILDREN:

Project PATT does not offer direct services to children although a number of supplementary services are provided. Emphasis is placed on teaching parents methods of engendering optimal social responsiveness from their visually handicapped infants. Parents carry out some infant stimulation procedures at home.

MEASURES OF CHILD PROGRESS:

A number of rating scales, self-report measures, questionnaires, and direct observations are used to assess child and parent progress. Assessment instruments are administered prior to intervention, immediately following intervention, and at six and 12 months following intervention. To assess child progress, the project uses the Vision-Up Assessment, the Callier-Azusa Scale, the Adaptive Performance Instrument, the Carey Infant/Toddler Temperament Scale, and the Behavior Observations of Parent-Infant Interactions. To assess parent progress, the project uses the Locke-Wallace Marital Satisfaction Scale, the Beck Depression Inventory, the Hopkins Symptoms Checklist, the Tennessee Self-Concept Scale, and the Home Observation for Measurement of the Environment Inventory. To measure the progress of siblings, the project uses the Child Behavior Profile and the Youth Self-Report Inventory.

PROGRAM FOR PARENTS:

Project PATT offers a ten-week intervention program consisting of a weekly two-hour meeting at the center followed by periodic booster sessions during the 12 months after termination of formal training. The meetings are designed to educate the parents about the nature of the child's condition, its impact on growth and development, and its influence on the family.

FEATURES AND PRODUCTS:

The family, including nonhandicapped siblings, participate directly in project activities. The project uses a standardized curriculum that is replicable in other settings; a skills-oriented program to teach parents strategies that can be used across problem areas; post-intervention booster sessions to facilitate the maintenance of gains; and an evaluation plan that yields quantifiable data and permits assessment of progress for all participants.

Project Prep

Preparation for Regular Kindergarten Placement

ADDRESS: Western Psychiatric Institute
and Clinic
201 DeSoto Street
Pittsburgh, Pennsylvania 15213

PHONE: (412) 624-0726

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Pittsburgh

DIRECTOR: Scott McConnell
OTHER STAFF TITLES: project coordinator, classroom teachers, aides, secretary

CHARACTERISTICS OF TARGET POPULATION:

This project provides services to ten 3- to 5-year-old children who demonstrate significantly deviant and maladaptive behavior patterns in a wide variety of settings and, as a result, are not expected to benefit from regular kindergarten without preliminary treatment and preparation. The project also serves six nonhandicapped children.

PROGRAM FOR CHILDREN:

Project PREP offers a classroom-based comprehensive preschool model which integrates (full-time) behavior-disordered children and nonhandicapped peers. Individual education plans are developed for both groups of children. The curriculum has three interrelated modules: 1) systematic programming for the reduction of deviant or maladaptive behavior patterns, 2) generic and individualized social and academic survival skills training, and 3) instruction in preacademic skills. Handicapped children are taught social and academic survival skills which are empirically related to successful placement and adjustment in future regular education settings.

MEASURES OF CHILD PROGRESS:

Child progress is measured by direct observation of social interaction and classroom performance using observational scales such as the SIC-E and the Classroom Adjustment Code. Preacademic skills are assessed with various criterion-referenced measures including the School Readiness Survey, the Boehm Test of Basic Concepts, Monitoring Achievement in Pittsburgh Mathematics and Reading, the Brigance Inventory, and the Classroom Survival Skills Checklist.

PROGRAM FOR PARENTS:

Orientation presentations provide parents with a conceptual understanding of the program's focus and a common vocabulary for further discussion and participation. Parents are later trained in the management of their children's deviant behavior, in child advocacy, and for participation in the classroom model.

FEATURES AND PRODUCTS:

The project will develop and distribute instruments to identify children's skills and a brochure that describes the project.

Neonate At Risk Project

ADDRESS: United Cerebral Palsy of Northeastern
Pennsylvania
230 Lackawanna Avenue
Scranton, Pennsylvania 18503

PHONE: (717) 587-5892

YEAR OF FUNDING: 1

FISCAL AGENCY: United Cerebral Palsy of Northeastern Pennsylvania

DIRECTOR: Diane Keller
OTHER STAFF TITLES: educator, social caseworker, media specialist, consultants, psychologist, occupational therapist, physical therapist, speech therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 50 infants and young children who are at risk for developmental disabilities.

PROGRAM FOR CHILDREN:

The program uses a transdisciplinary service delivery system in a home-based setting. The purpose of the project is to ensure that each child attains his or her maximum level of development in the areas of cognition, gross- and fine-motor development, language, self-help and independence, and socialization.

MEASURES OF CHILD PROGRESS:

Each child is evaluated upon referral and at least every six months thereafter using the Gesell and Michigan. Occupational therapy, physical therapy, and speech and language assessments are also conducted. Individual progress of children is evaluated by the objectives standards model. An Observable Criterion Scale evaluation is used by staff members to observe progress. The Objectives Attainment Scale provides an individual score that represents goal attainment throughout the program and after.

PROGRAM FOR PARENTS:

The overall goal of the parent program is to help the at-risk child to be positively integrated into the family. To achieve this goal, parents are instructed in growth and development principles and intervention strategies so they can carry out their children's programs at home. Monthly parent support and education meetings are held at the center. Siblings of the at-risk infants are also involved in sessions.

FEATURES AND PRODUCTS:

The project offers a training program for associate degree students of a local junior college. These students spend practicum hours acting as family resource aides to project participants. Products developed by the project include a home visit kit, a parent handbook, and a program brochure.

Demonstration Project for Visually Impaired Preschoolers

ADDRESS: Barbosa Avenue and
Esquina Guayana Street
Hato Rey, Puerto Rico 00917

PHONE: (809) 758-4646

YEAR OF FUNDING: 1

FISCAL AGENCY: IIA of World University

DIRECTOR: Hector Quinonez
OTHER STAFF TITLES: consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 visually impaired infants age 3 to 5 years and their parents at the Loaiza Cordera School for the Blind.

PROGRAM FOR CHILDREN:

The project uses a diagnostic-prescriptive teaching approach and draws on latest materials and research to develop and evaluate curricula, instructional materials, and assessment instruments in a bilingual format (Spanish and English). The model facilitates the transition of visually handicapped children into settings with nonhandicapped children by supporting and training teachers and teaching children the skills they will need to make that transition.

MEASURES OF CHILD PROGRESS:

Project staff members use a variety of formal and informal measures to assess child progress.

PROGRAM FOR PARENTS:

Parents are targets for services and participate on the advisory council.

FEATURES AND PRODUCTS:

The project plans to disseminate information about the model in order to increase community awareness and encourage replication. The model is a cooperative venture of an institution of higher education, the state education agency, and a local education agency.

Project Child

ADDRESS: Project CHILD
520 Hope Street
Providence, Rhode Island 02906

PHONE: (401) 274-2500

YEAR OF FUNDING: 3

FISCAL AGENCY: Providence Center for Counseling and Psychiatric Service

DIRECTOR: Fredericka B. Bettinger
COORDINATOR: Haven Miles
OTHER STAFF TITLES: psychologists, early childhood and special educators

CHARACTERISTICS OF TARGET POPULATION:

The project serves 44 children from 27 families (14 children are birth to age 3 years; 15 children are age 3 to 5 years; 15 children are age 5 to 6 years). The children are at risk for delays in cognitive or emotional development, and one or both parents have experienced one or more psychotic episodes and subsequent interruption or regression in their ability to parent. Most of the families live in the Providence area.

PROGRAM FOR CHILDREN:

Project CHILD provides home- and center-based services. Contacts range from two to five weeks and include home visits, individual visits to the center, and groups for children and parents. Treatment focuses on helping the parent resume his or her role in the family, improving parenting skills and interaction between parent and child, and providing stimulation to the child to remediate delays. Individual education plans are based on results of the Alpern-Boll, the Bayley Scales of Infant Development, and the McCarthy Scales of Children's Abilities.

MEASURES OF CHILD PROGRESS:

The project administers the Denver Developmental Screening Test upon referral. The Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities, the Alpern-Boll Developmental Profile II, and a videotape (coded) of the parent and child interacting are used every six months to assess progress.

PROGRAM FOR PARENTS:

Parents can be involved in parent-child groups and in a day treatment program for development of socialization skills and occupational therapy. Project CHILD videotapes parent and child interactions every three months to document change. The Parent Satisfaction Questionnaire is also administered.

FEATURES AND PRODUCTS:

The project has developed a training program of successful treatment strategies to provide background information to staff of other agencies already involved with these families and to assure continuity of care. The project has developed the Parent Satisfaction Questionnaire and a coding system for analyzing videotapes to assess interactions between parents and children. The project works to increase understanding of clinical issues involving psychotic parents and their affect on young children.

Little Tennessee Valley Education Cooperative
Birth-Thru-Three Program

ADDRESS: LTVEC
Route 9, Box 316
Lenoir City, Tennessee 37771

PHONE: (615) 986-5646

YEAR OF FUNDING: 3

FISCAL AGENCY: Little Tennessee Valley Educational Cooperative

DIRECTOR: Jerome H. Morton
COORDINATORS: Pamela Potocic, Karen Keith, Cindy Marshall
OTHER STAFF TITLES: physical therapist, occupational therapist, speech/language pathologist, teacher of the visually impaired, teaching assistants/aides

CHARACTERISTICS OF TARGET POPULATIONS:

The program serves 30 children birth to age 3 years who meet one of the following criteria: 1) medical diagnosis of a condition associated with mental retardation; 2) cognitive abilities measured on standardized test instruments within the moderate, severe, or profound range of mental retardation; 3) moderate to severe delay in two of the five developmental areas (cognitive, language, gross motor, fine motor, personal-social). The children live in three Appalachian counties where services are sparse.

PROGRAM FOR CHILDREN:

A precision-teaching instructional approach is incorporated into a center-based program which the children attend two mornings weekly. Home-based programming is provided to each child. Three sites share the expertise of site directors (an early childhood psychologist, a family counseling psychologist, and a special educator). The center-based program uses learning centers for curricular areas. The project provides specialized services to children at center sites as determined through diagnostic assessments by specialists.

MEASURES OF CHILD PROGRESS:

The project uses the Bayley Scales of Infant Development, the Stanford-Binet Intelligence Scale, the Brigance Inventory of Early Development, the Memphis Scale, the PEACH Scale, Assessment in Infancy--Ordinal Scales of Psychological Development, the Developmental Checklist (Cunningham and Sloper), the Sequenced Inventory of Communication Development, Oliver, the Environmental Prelanguage Battery, and the Spontaneous Communication Sample (administered at least biannually).

PROGRAM FOR PARENTS:

Parent involvement includes training, classroom involvement, and participation on the advisory board and multidisciplinary teams. The project helps parents establish respite care arrangements. Parent Information Centers have been established.

FEATURES AND PRODUCTS:

As a regional agency, LTVEC has developed a cost-effective delivery strategy using professional staff in three rural counties. Products include: program replication, paraprofessional staff training guidelines, hiring procedures, a parent handbook, pamphlets, and forms to use at the centers. Project staff members can share expertise in the areas of cooperative educational services and statistical program evaluations.

Cognitive Education for Preschool Handicapped Children

ADDRESS:	Box 9 George Peabody College Vanderbilt University Nashville, Tennessee 37203	PHONE: (615) 322-8380 YEAR OF FUNDING: 3

FISCAL AGENCY: Vanderbilt University

DIRECTOR: Susan Burns
INVESTIGATORS: H. Carl Haywood and Penelope Brooks
OTHER STAFF TITLES: teachers, teacher assistants, parent trainers, curriculum specialists, data collector, psychological tester

CHARACTERISTICS OF TARGET POPULATION:

The project serves 33 children age 42 months to 5 years who meet specified psychometric and high-risk criteria.

PROGRAM FOR CHILDREN:

The program for children focuses on the development of a curriculum for cognitive education; the emphasis is on teaching children how to think and learn. The curriculum is process oriented (precognitive and cognitive functions are taught with teacher-mediated learning experiences). The center-based program uses two sites: the Kennedy Center Experimental School and a community-based program in a low-income area. Children attend class year-round, about seven hours daily, four or five days weekly.

MEASURES OF CHILD PROGRESS:

The project administers the McCarthy Scales of Children's Abilities pre- and posttest to determine cognitive gains. Several tests of motivation are administered throughout the year. Criterion-referenced measures of curricular progress, observations of classroom behavior, and teacher ratings of behavior are used. Children's performances on transfer of cognitive tasks are measured and observed twice yearly.

PROGRAM FOR PARENTS:

Parent trainers develop parent activities consistent with the curriculum, and they instruct parents in implementation. Parents implement the activities at home and record their children's responses on a Parent Training Record. Parents are advised of counseling, social, and educational services. Parents serve on the advisory committee.

FEATURES AND PRODUCTS:

Cognitive progress of project children is compared to progress of children in a regular Head Start program. Gains will be compared across the two groups at the end of the program in an analysis-of-variance design. The degree to which teachers accept and implement the curriculum is measured by observation once a month. The program is based on the theories of Feuerstein, Piaget, and Vygotsky.

Optimal Learning Environments for Handicapped Infants

ADDRESS:
Peabody College
MRL Building
Department of Special Education
P. O. Box 328
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8277

YEAR OF FUNDING: 1

FISCAL AGENCY: Vanderbilt University, Peabody College

COORDINATOR: Cathy Alpert
OTHER STAFF TITLES: project evaluator, physical therapist, parent trainer, coordinator, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves severely handicapped infants from birth to age 3 years. To be eligible for the program, the child's developmental status must be at a level below age 15 months as indicated by standardized infant assessments. Preference is given to neurologically impaired children and children with multiple handicaps.

PROGRAM FOR CHILDREN:

The center-based program is based on the principles of environmental design and demonstrates a transdisciplinary approach. Microcomputer technology helps staff members make decisions, plan curricula, prepare individual education plans (IEP), and collect and analyze data. The curriculum embodies the concepts and practices associated with incidental teaching and the Individualized Curriculum Sequencing model.

MEASURES OF CHILD PROGRESS:

Initial assessment of children includes the Bayley Scales of Infant Development, the Adaptive Performance Instrument, and therapy evaluations. Child progress is measured through use of standard developmental scales, evaluation of the IEP, and evaluation of individual learning programs using the AIMSTAR microcomputer program.

PROGRAM FOR PARENTS:

The program for parents is based on the needs and dynamics of each family situation. Support services include: counseling, management and treatment skills, environmental arrangement in the home, stress and time management, identification of support networks and other services, support groups, and classroom participation.

FEATURES AND PRODUCTS:

This model emphasizes the design and implementation of an optimal learning environment for early intervention. The center-based program is cost-effective and demonstrates replicable procedures for maximizing children's learning in community settings.

Project TOTAL
To Offer Tots Alternative Language

ADDRESS: Project TOTAL
3309 Richmond Avenue
Houston, Texas 77098

PHONE: (713) 521-9584

YEAR OF FUNDING: 3

FISCAL AGENCY: Mental Health and Mental Retardation Authority of Harris County

DIRECTOR: Marlene Hollier
COORDINATOR: Christine Watkins
OTHER STAFF TITLES: teacher, teacher aide, speech pathologist, project evaluator

CHARACTERISTICS OF TARGET POPULATION:

The project serves 12 children aged 18 months to 3 years who are developmentally delayed or are at risk for delay. All children have additional significant language delays; all have normal hearing.

PROGRAM FOR CHILDREN:

The program for children consists of two four-hour group sessions weekly for each child. Total communication is used to train the child in areas of development including cognitive, social, fine-motor, gross-motor, and language skills. Home visits assist with carryover activities.

MEASURES OF CHILD PROGRESS:

The project assesses child status twice yearly with the Sequence Inventory of Communication Development, Receptive Expressive Emergent Language Scale, and curricululm forms and checklists developed by project staff.

PROGRAM FOR PARENTS:

Each parent attends their child's class one day (four hours) and 45 minutes of a second day weekly. In the classroom, parents work with their children, receive signing instruction, and participate in parent support, information, and language-activity groups.

FEATURES AND PRODUCTS:

A special feature of the program is training provided to infant educators in total communication for normal-hearing, delayed chidren. The project curriculum is composed of language demonstration activities for the professional to use in parent-child groups, home activity sheets for parents to use at home, a curriculum guide, and individual activity sheets with specific language and play skills, goals, and objectives.

Early Childhood Special Education Project

ADDRESS: Department of Education
P.O. Box I
Christiansted, St. Croix
U.S. Virgin Islands 00820

PHONE: (809) 773-7755

YEAR OF FUNDING: 3

FISCAL AGENCY: Virgin Islands Department of Education

COORDINATOR: Ellie Hirsh
OTHER STAFF TITLES: classroom teachers, home and school resource teachers, aides, physical therapist, speech and language therapist, social worker

CHARACTERISTICS OF TARGET POPULATION:

The project serves 64 children age 3 to 5 years with diverse handicaps. The children represent various cultural backgrounds; most children are from the islands of the West Indies.

PROGRAM FOR CHILDREN:

The project has a center on the island of St. Thomas and one on the island of St. Criox. The centers operate for ten months yearly. All children and their families receive weekly home visits for parent counseling and training and direct child services. Depending on need, the project serves the child in a self-contained classroom, mainstream classroom, or a combination of the two. A diagnostic-prescriptive approach is used. A variey of curriculum methods and materials are used to assist each child in the achievement of goals and objectives. Selection of the appropriate approach is based on each child's strengths, weaknesses, needs, and learning style.

MEASURES OF CHILD PROGRESS:

Portions of both the Brigance Inventory of Early Development and the Preschool Program of Studeis (Fairfax County, Virginia) are used to measure child progress.

PROGRAM FOR PARENTS:

Parents participate in individual and group counseling and a home and group training program. Parents and families are encouraged to visit the centers and participate in program activities. A library of materials and resources is available to parents.

FEATURES AND PRODUCTS:

The project is a highly individualized program in terms of educaitonal planning, placement, and service delivery. The multicultural character of the West Indies is addressed through its music in relation to body awareness and motor development. A file of daily living home activities is being developed for parents to use with their children. A program manual is also being developed. Since many children enrolled in the project are mainstreamed in Head start, day care, and private school programs, the project provides the teaching staffs of these programs with a library of materials and resources and weekly technical assistance and training in working with the handicapped child in the classroom.

The Social Integration Project

ADDRESS: Exceptional Child Center, UMC 68
Utah State University
Logan, Utah 84322

PHONE: (801) 750-1991

YEAR OF FUNDING: 3

FISCAL AGENCY: Utah State University

DIRECTOR: Joseph J. Stowitschek
CO-DIRECTORS: Sebastian Striefel and Craig Boswell
COORDINATOR: Sarah Rule
OTHER STAFF TITLES: project teacher, liaison specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves nine children directly and three indirectly. The children are age 3 to 6 years and present mild to severe handicaps including developmental delays, mental retardation, and communication and behavior disorders. Eligibility criteria are those identified in the Developmental Disability/Mental Retardation Policy Manual for the state of Utah.

PROGRAM FOR CHILDREN:

The program focuses on integrating handicapped children into day-care centers through systematic, individualized preschool curricula with an embedded social interaction training program. Instruction is avaiable in the areas of social skills (Let's Be Social Home Curriculum), language, self-help skills, math, prereading, handwriting, and gross-motor skills. The Program Planning and Assessment Guide is used to assess children's skills and to develop instructional objectives. Speech, language, and psychological services are provided by specialists who conduct assessments, plan programs to be conducted by project or day-care staff, and help to monitor progress. A home social training component is included. Children receive up to ten hours of daily service at the centers and varying instruction at home.

MEASURES OF CHILD PROGRESS:

The Stanford-Binet Intelligence Scale, the McCarthy Scales of Children's abilities, and the Bayley Scales of Infant Development are administered at the beginning and end of the school year. Various systems of direct observation are used to assess children's social interaction. The Program Planning and Assessment Guide is administered quarterly, and ratings of present satisfaction are obtained yearly.

PROGRAM FOR PARENTS:

Parents meet with staff members quarterly to help plan individual education programs. Parents implement the Let's Be Social Home Curriculum. Training is conducted through workshops, home visits, and individual meetings. Assessment of parent satisfaction is done through Likert Scale ratings. Home social skills training by parents is assessed by direct observation of children at the center.

FEATURES AND PRODUCTS:

A comparative evaluation using multiple measures of children's skills was conducted during the second year of program operation. Both normative and criterion-referenced tests and direct observation suggest that the model provides a viable instructional alternative. Products include the Basic Skills Training Manual and the Let's Be Social Home and School Curriculum.

INSITE

In-home Sensory Impaired Training and Education

ADDRESS: Utah State School for the Deaf & Blind
846 20th Street
Ogden, Utah 84401

PHONE: (801) 399-9631
ext 264
YEAR OF FUNDING: 3

FISCAL AGENCY: Utah Schools for the Deaf and the Blind

CO-DIRECTORS: Thomas C. Clark and Wayne Noble
COORDINATOR: Elizabeth Morgan
OTHER STAFF TITLES: psychologist, evaluator, ophthalmologist, parent advisors, physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 visually impaired (most have additional handicaps) and seven deaf-blind children birth to age 5 years.

PROGRAM FOR CHILDREN:

Children's handicaps are identified as soon after birth as possible. After diagnosis, appropriate prosthetic devices or adaptive equipment are recommended, and maximum attention is given to early treatment of the sensory disorder. The child is then served as a member of the family in a home-based program. The family receives weekly visits by a parent advisor who models developmental activities for the parents. The parent advisor also shares basic information with parents during special parent lessons. For the multihandicapped, a local therapist makes home visits each semester. Occasionally, additional support is provided to families of deaf-blind, severely impaired, or neglected children.

MEASURES OF CHILD PROGRESS:

Each child receives a pretreatment assessment within one month of program entry. The same assessment is given each semester, and results are analyzed to determine programming for the next semester. Weekly and monthly behavioral data are kept on the child's goals. Instruments used are the Callier-Azusa, Bromwich, and the project's developmental checklist cross-referenced to existing curricula such as the HELP, Oregon Project, and the Teaching Research Curriculum.

PROGRAM FOR PARENTS:

The parent program is based on an ecological and environmental model that considers parents to be an integral part of the program for children. The parent advisor works with the parent on every home visit to make the home a meaningful environment for the child's development. Parent group sessions are offered at least twice yearly. Parent advisors and parents plan informal social gatherings as desired. A lending library of books and some adaptive equipment is available to parents.

FEATURES AND PRODUCTS:

There are four major features of the project: delivery of services by one caregiver to all sensory-impaired children living in a large geographic area, the treatment of the sensory disorder through prosthetic devices, treatment in the home in conjunction with medical agencies, and the use of local part-time parent advisors paid per visit to ensure a cost-effective delivery model. The main product will be a comprehensive manual on delivery of services to sensory-impaired children. Curriculum materials are available.

SPECTRM

Specialized Programs for Exceptional Children of Teenage Non-Relinquishing Mothers

ADDRESS: Children's Aid Society of Utah
652 26th Street
Ogden, Utah 84401

PHONE: (801) 393-1154

YEAR OF FUNDING: 1

FISCAL AGENCY: Utah State University

DIRECTOR: Helen Mitchell

OTHER STAFF TITLES: parent trainer, intervention coordinator, intervention specialist, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves approximately 20 children birth to age 5 years whose mothers receive services from the Children's Aid Society of Utah. Children birth to age 3 years must show evidence of, or be at risk for, developmental delay. Children age 3 to 5 years must score 1.5 standard deviations below the mean of children their own ages in two or more of the five developmental areas. Many children admitted into the project are classified as emotionally or behaviorally handicapped.

PROGRAM FOR CHILDREN:

Staff members assess each child and specify developmentally sequenced training activities. Curricula include: the Curriculum and Monitoring System, the Portage Guide to Early Education, Developmental Programming for Infants and Young Children, and Small Wonder. For those children under age 4 years, the major service delivery system used is a home-based program with the mother as the primary intervention agent. For children age 3 years and older, project staff members consider the specific needs of the family and provide either center-based day care or family home day care. Personnel caring for the child are trained and monitored weekly.

MEASURES OF CHILD PROGRESS:

Upon entry into the program and again at the end of the year, children are administered a battery of standardized tests including the Bayley Scales of Infant Development, the Collier-Azusa Scale, the Peabody Picture Vocabulary Test, and the Boehm Test of Basic Concepts. A posttest is administered to monitor child progress. Observational data are collected daily by project staff. A multiple baseline approach is used to analyze data.

PROGRAM FOR PARENTS:

Mothers or caretakers involved home-based intervention receive training and are monitored weekly at home by project staff members. A social worker visits the home weekly to support and counsel the mother and help her achieve her educational, vocational, and personal goals. The project helps mothers develop support groups and a parent resource library and offers a "Mothers Night Out" program which enables these single parents to obtain needed psychological and social services and recreation.

FEATURES AND PRODUCTS:

The project offers a five-day workshop for day-care personnel and graduate students. The workshop focuses on the basic procedures used in day-care settings, preschool stimulation techniques, and the application of specific educational methods and procedures.

RIFE

Rural Infant and Family Education Project

ADDRESS: RIFE Project
Box 646 11 Seminary Street
Middlebury, Vermont 05753

PHONE: (802) 388-3171

YEAR OF FUNDING: 3

FISCAL AGENCY: Parent/Child Center, Inc.

CO-DIRECTORS: Cheryl Mitchell and Sue Harding
OTHER STAFF TITLES: speech and language pathologist, home visitors (special and early education generalists), special projects coordinator

CHARACTERISTICS OF TARGET POPULATION:

The project serves the families of 40 children under age 4 years with a mixed range of handicaps.

PROGRAM FOR CHILDREN:

RIFE considers the parent the central figure in the child's growth and education. The team supports and educates the parent through modeling, curriculum presentation, discussion, classes, support groups, and evaluation. Program options include: 1) a weekly home visit and a weekly mainstream playgroup (on alternate weeks, parents and children participate together or parents meet to discuss family issues while children play); 2) a mainstream group in the Infant-Toddler Center four mornings weekly (parents participate two hours weekly); 3) a full day of developmental child care for children of working parents; and 4) physical and occupational therapy and other specialized services. Communication skills are considered vital.

MEASURES OF CHILD PROGRESS:

The project uses the Bayley Scales of Infant Development as a pre and post measure and monitors progress with the Family Service Plan quarterly and the Early Learning Accomplishment Profile biannually. The Uzgirus-Hunt Scale of Infant Psychological Development is used to help plan the child's program. Extensive notes from home visits are shared with parents and used to do single-subject analyses and case studies. Videotapes of parents and children are analyzed to determine change.

PROGRAM FOR PARENTS:

The project offers classes, workshops, a parent stipend program, support groups, advisory board, parent and child playgroups, social activities, volunteer opportunities, and parent cooperative services (babysitting, laundry, carpentry, auto body work, mechanics, transportation, clothing and equipment exchange). A strong community service network and the Family Service Plan help families receive all desired services to which they are entitled.

FEATURES AND PRODUCTS:

Project RIFE is a rural program serving extremely socially isolated families many of whom are undereducated and under- or unemployed. An interagency transportation network, small town playgroups, a van equipped to set up "instant parent and infant centers," an open community family play day, and flexible program options help to overcome these barriers to mainstreaming children and supporting and educating families. The Family Service Plan, based on the parents' dreams and concerns for their child, helps to empower parents, coordinate services, and provide an optimal program for the child.

TIMMI

Training and Intervention to Multihandicapped Mothers and Infants

ADDRESS: Infant Intervention Program
2008 Wakefield Street
Petersburg, Virginia 23805

PHONE: (804) 862-9940

YEAR OF FUNDING: 1

FISCAL AGENCY: District 19, MH/MR Services Board

DIRECTOR: Stephanie Parks
COORDINATOR: Joal S. Read
OTHER STAFF TITLES: infant educator, occupational therapist, speech pathologist, mental health therapist, physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The treatment program serves 20 noncategorically handicapped and delayed infants from birth to age 2 years who have high-risk or handicapped parents. The monitoring program serves 30 to 40 high-risk infants.

PROGRAM FOR CHILDREN:

The program administers weekly home- and center-based individual intervention to train parents to become their child's primary teacher in all developmental areas. The project uses a transdisciplinary approach. Assessment in Infancy, Ordinal Scales of Psychological Development, Carolina Record of Individual Behavior, and the Hawaii Early Learning Profile (HELP) are used to plan instruction.

MEASURES OF CHILD PROGRESS:

The program uses the Bayley Scales of Infant Development annually and HELP, CRIB, staff observation protocols, Milani-Comparetti Motor Development Screening Test, HOME, and Parent/Infant Interaction Ratings every four to six months.

PROGRAM FOR PARENTS:

The project adapts infant curriculum activities and processes to facilitate the handicapped parent's active participation in all intervention sessions with the child. Parent needs are assessed individually. Parent support, education, and training groups are held periodically.

FEATURES AND PRODUCTS:

The project is developing alternative service delivery strategies to facilitate communication, compliance, and involvement for disabled parents of high-risk or handicapped infants. The HELP Activity Guide is being adapted to compensate and accommodate for parental handicaps (hearing or visual impairments, mental retardation, physical disability). The project has also developed procedures which facilitate the children's smooth and coordinated transition from the infant program to local education agencies.

Project Cope

ADDRESS: The Children's Center
P. O. Box 908
Suffolk, Virginia 23434

PHONE: (804) 539-2041

YEAR OF FUNDING: 1

FISCAL AGENCY: Edmarc, Inc.

DIRECTOR: Barbara S. Mease

OTHER STAFF TITLES: infant education specialist, nurse practitioner, physical therapist, speech therapist, day care supervisor, case manager, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves 20 developmentally disabled or chronically ill infants from birth to age 2 years and 10 chronically ill children age 3 to 8 years. Nearly 60 percent of the children are from low-income families; approximately 50 percent live in sparsely populated rural areas; approximately 23 percent of the mothers were teenagers; and approximately 50 percent of the infants served represent racial minority groups.

PROGRAM FOR CHILDREN:

A combination of home- and center-based services are provided. Parents who so choose have the option of placing their child in a mainstreamed child care center. Activities include supervised free play, crafts, movement, singing, story telling, and outside play. In-service training and technical assistance are provided to teachers of the school-aged children.

MEASURES OF CHILD PROGRESS:

Children are assessed using the Receptive-Expressive Emergent Language Scale, the Early Learning Accomplishment Profile, the Milani-Comparetti Motor Development Screening Test, a physical assessment tool, and the Bayley Scales of Infant Development.

PROGRAM FOR PARENTS:

Project staff members encourage parents to observe the way their children interact with other children. Center-based respite care is available to parents. Weekly teaching contacts with each parent provide time for the case manager to introduce new activities and discuss the child's interactions at the center. Parent satisfaction is measured by questionnaires.

FEATURES AND PRODUCTS:

Products to be developed include a directory of organizations serving developmentally disabled children and their families, a pamphlet on organizing and leading an effective case conference, a manual of nursing strategies for chronically ill children, a tool for assessing basic parenting skills, a manual describing potential uses of microcomputers in early intervention programs, and several computer programs.

Bright Beginnings

ADDRESS: Matthew Whaley School
101-D Mounts Bay Road
Williamsburg, Virginia 23185

PHONE: (804) 220-3397

YEAR OF FUNDING: 1

FISCAL AGENCY: Williamsburg-James City County Public School

DIRECTOR: Carol Beers
COORDINATOR: Jerri Millican
OTHER STAFF TITLES: infant case managers, preschool case managers, teachers

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 60 children birth to age 5 years who are at risk for mental retardation. The children eligible to receive project services have been found ineligible to receive other public services, or they have been discharged from the public school system or the local nonprofit agency which serves young handicapped children.

PROGRAM FOR CHILDREN:

Children in Category I are referred to appropriate community resources and are rescreened every three to six months. Children in Categories I and II can participate in Training Centers which involve small groups of children and parents in shared learning experiences (the High/Scope Curriculum is used as a resource). Children in Category II also receive supplemental services from outside agencies and may enroll in language groups in which Developmental Language teaching techniques are used. Children may also enroll in regular classrooom and day-care programs in which project staff help teachers deliver appropriate educational intervention. In Category III, two classes -- one for 18- to 36-month-olds; the other for 3- to 5-year-olds -- serve as a transition placement until the children are able to function at an age-appropriate level of development.

MEASURES OF CHILD PROGRESS:

The project uses standardized IQ measures, selected developmental and educational variables, the McCarthy Scales of Children's Abilities, the Bayley Scales of Infant Development, and other instruments to measure child growth.

PROGRAM FOR PARENTS:

An initial individual family plan is developed by parents and project staff members. Staff members visit children at least once each month to work on specific needs of the child or parent. Activities are based on the High/Scope Curriculum. Parents are free to participate in almost all aspects of the project, including volunteering in the classroom and serving on the advisory board.

FEATURES AND PRODUCTS:

The project represents the coordinated efforts of two district agencies. The project's goal is to ensure a smooth transition for the children as they move from one agency to the other. The project offers services at many different locations so that parents and children can easily attend.

Umbrella for Families
A Cooperative Rural Model for Early Childhood Services

ADDRESS: ECSO
North Elementary
Larson Boulevard & Craig Drive
Moses Lake, Washington 98837

PHONE: (509) 762-5518

YEAR OF FUNDING: 3

FISCAL AGENCY: Early Childhood Services Organization

DIRECTOR: Karen LaGrave Small
OTHER STAFF TITLES: speech therapist, physical therapist or occupational therapist, physician, family coordinator, educational specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 25 children birth to age 5 years. The children exhibit all handicaps except emotional disturbance and learning disability. The children live in a sparsely populated rural area of central Washington.

PROGRAM FOR CHILDREN:

The program for children consists of home- and center-based individual intervention programs and the gradual development of group intervention services. The project offers three options for services: a home-based program; one to eight one-hour visits monthly to the center for individual treatment; and weekly two-hour sessions for parents and infants supervised by an interdisciplinary staff.

MEASURES OF CHILD PROGRESS:

The Bayley Scales of Infant Development or the McCarthy Scales of Children's Abilities are used with each child at six-month intervals. Other assessment tools are used by team members as needed. The West Virginia Data Collection System is used to document specific areas of progress for each child.

PROGRAM FOR PARENTS:

Parents have several options for involvement, including notebook development, home visits, observation, participation in treatment, conferences, family therapy, parent meetings, parent task forces, project evaluation, and extended family participation.

FEATURES AND PRODUCTS:

The project develops individual notebooks that contain all the relevant information required for initial and future evaluations for each child. Products will include a brochure about the project's videotapes of visiting medical specialists and a book about starting an early intervention center in a rural area.

CAP Project

Computer-Assisted Program

ADDRESS: Experimental Education Unit
University of Washington WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Susan Sandall
OTHER STAFF TITLES: physical therapist, teacher, communication disorders specialist, computer programmer, materials specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves underserved families, their young handicapped children (birth to age 3 years), and the agencies that serve them. During the first year, 14 children will be served in the center-based program, and 16 children will be served in the field-based program. Handicaps include: cognitive delays, visual impairments, and deaf-blind.

PROGRAM FOR CHILDREN:

Comprehensive programming is provided, and instructional activities are suggested for home implementation. The activities which are identified and tried with center-based families become the basis for a computerized procedure for selecting activities which meet the needs of the field-based children. The parents of the field-based children assess their children and implement activities designed to fit into the family's daily routine.

MEASURES OF CHILD PROGRESS:

The project uses the Early Intervention Developmental Profile to assess each child upon entry to the program and at three-month intervals. A standardized measure is also used at six- or 12-month intervals. Staff members collect weekly progress records for center-based children and monitor the progress of field-based children by telephone.

PROGRAM FOR PARENTS:

Parents in the center- and field-based components are actively involved in their children's educational and therapeutic program. A parent support group is offered for parents of children in the center program. A parent network provides peer support (via letters and telephone calls) to other parents. Staff members help parents in the field-based component find services in their local areas.

FEATURES AND PRODUCTS:

The project provides individualized programs for field-based families who lack access to local services. Staff members are developing software for the generation of individualized educational and therapeutic programs for children birth to age 3 years.

SEFAM
Supporting Extended Family Members

ADDRESS: Experimental Education Unit WJ-10
Child Development and Mental Retardation Center
University of Washington
Seattle, Washington 98195

PHONE: (206) 543-4011

YEAR OF FUNDING: 3

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Donald J. Meyer
OTHER STAFF TITLES: family trainer, materials specialist

CHARACTERISTICS OF TARGET POPULATION:

The project serves 30 families of handicapped children birth to age 5 years. The children are mentally retarded, hearing impaired, visually handicapped, orthopedically impaired, or multihandicapped. The majority of children are enrolled in direct-service programs offered by other agencies. During the first year, the primary emphasis is on the father and child dyad. In the second year, siblings of the handicapped child will be included. In the third year, extended family members are targeted for services.

PROGRAM FOR CHILDREN:

SEFAM provides biweekly Saturday morning sessions and individual family conferences. Children are referred to the program from the Model Preschool for Handicapped Children Outreach Project, the Northwest Center Infant/Toddler Development Program, and other programs in the Seattle area.

MEASURES OF CHILD PROGRESS:

The program uses a management-by-objectives approach, based on Tyler's Objective Attainment Framework. Within the context of this system, change is monitored through measures of parents' knowledge of community resources, social support networks, level of depression, role satisfaction, and general and specific beliefs about coping. The Bayley Scales of Infant Development is used to monitor child progress.

PROGRAM FOR PARENTS:

The project focuses primarily on the father and child dyad, with extension to siblings and other family members. Mothers are welcome to participate in many of the program activities and are completing several of the measures being used to evaluate program impact on the family. The major emphasis of the program is to help family members be better caregivers, educators, and advocates.

FEATURES AND PRODUCTS:

The project will develop a curriculum for training fathers, siblings, and extended family members to increase their skills in coping with, interacting with, and educating their child.

Project PEPSI

Providing Educational Programs to Special Infants

ADDRESS: Summit Center for Human Development
6 Hospital Plaza
Clarksburg, West Virginia 26301

PHONE: (304) 623-5661

YEAR OF FUNDING: 1

FISCAL AGENCY: Summit Center for Human Development

DIRECTOR: Chris Hanson
OTHER STAFF TITLES: developmental specialist, screener, infant teachers, speech therapist, preschool teacher, consultants, physical therapist

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 3 years who are considered high risk because of a combination of developmental, socio-economic, environmental, and psychological factors.

PROGRAM FOR CHILDREN:

The project screens for handicapping and high-risk conditions during prenatal, neonatal, and post natal visits with the family doctor. Children at risk for developmental or psychological problems or parents with psychological problems may enter the project's direct-service component. After further testing, individual education plans are written for each child and parent. Parents bring their children to the center for one-hour sessions one to four times monthly where staff members show parents tasks they should carry out at home. Parents work with their child for five to ten minutes daily on each task (step-by-step instructions are printed on method cards). The Early Learning Accomplishment Profile is used as a curriculum guide. The project also provides follow-up services for children who complete the direct service component of the program.

MEASURES OF CHILD PROGRESS:

The project assesses child development, interaction between parent and child, and parent effectiveness. The Learning Accomplishment Profile (LAP) and the Early LAP are used quarterly to measure child progress on developmental skills. Parent and child interaction is measured quarterly using the Nursing Child Assessment Teaching Scale. To assess the parent as teacher, staff members observe the parents and use a project-developed rating scale. (Data is analyzed to detect training trends).

PROGRAM FOR PARENTS:

The curriculum for correcting aberrant socio-emotional patterns and facilitating bonding and appropriate parenting uses much the same approach (i.e. method cards and center visits) as does the program for children. In addition to being given method cards, parents are also supplied with a manual which covers topics such as feeding, skin care, elimination patterns, separation and stranger anxiety, and safety.

FEATURES AND PRODUCTS:

The project attempts to link the family physician and infant stimulation services by offering screening services and training physicians to incorporate risk screening into standard operating procedures. The project proposes to develop a computer-based information management system and a curriculum for parent and child interaction.

Active Decision Making by Parents

ADDRESS: Specialized Education Services
545 West Dayton Street
Madison, Wisconsin 53706

PHONE: (608) 263-5824

YEAR OF FUNDING: 3

FISCAL AGENCY: Madison Metropolitan School District

CO-DIRECTORS: Lisbeth J. Vincent and Jon Miller
OTHER STAFF TITLES: curriculum specialists

CHARACTERISTICS OF TARGET POPULATION:

The project serves parents of children birth to age 6 years presently enrolled in the Early Childhood Special Education Program of the Madison Metropolitan School District.

PROGRAM FOR CHILDREN:

The Madison Metropolitan School District serves all handicapped children. Children are served in regular public school buildings where normal peer models are included in early childhood classrooms. The school district staff includes early childhood special education teachers, speech and language clinicians, physical and occupational therapists, audiologists, mobility specialists, social workers, and school psychologists.

MEASURES OF CHILD PROGRESS:

Project staff members measure child growth biannually with standardized developmental tests and quarterly with criterion-referenced, teacher-developed tests. Individual education plans (IEP) are followed for all program graduates.

PROGRAM FOR PARENTS:

Parents are offered a menu of services from which they and staff can choose options that best fit the families' and the children's needs. Services include home visits, school visits, and parent workshops. The project teaches parents how to participate in the IEP process and plan for the children's out-of-school activities.

FEATURES AND PRODUCTS:

The project provides products for distribution through the Madison Metropolitan School District. The products emphasize ongoing data collection by parents, use of non-school environments, and written IEP goals developed by parents for out-of-school activities. The project proposes to develop a procedural manual for involving parents in planning for the transition of their child from an early childhood special education program into a traditional school program.

Project SPICE
Special Programs of Infant and Child Education

ADDRESS: Department of Exceptional Education
University of Wisconsin
Milwaukee, Wisconsin 53201

PHONE: (414) 963-5251

YEAR OF FUNDING: 1

FISCAL AGENCY: University of Wisconsin--Milwaukee

DIRECTOR: Donna Lehr
OTHER STAFF TITLES: lead teacher, teacher, teaching aide, secretary, consultants

CHARACTERISTICS OF TARGET POPULATION:

The project serves children birth to age 3 years and their families or primary care providers. Students with severe delays from both single and multiple impairments are included.

PROGRAM FOR CHILDREN:

Services are provided in both school and home settings. All students attend school four days weekly, four to five hours daily. Additionally, program staff members meet weekly with each child's caregiver to provide instruction in methods for teaching the child. The basic principles of applied behavior analysis are used to plan, implement, and evaluate educational programs in the areas of motor functioning, language and communication, social and emotional adjustment, self-help skills, and cognition. A variety of curricular guides are used including the Behavioral Characteristics Progression, the Portage Guide, and Teaching Your Down's Syndrome Infant. The project emphasizes the integration of therapeutic and educational goals; and both goals are combined with quality day-care services.

MEASURES OF CHILD PROGRESS:

Standardized tests such as the Developmental Profile and Uniform Performance Assessment Scale, and criterion-referenced tests such as the Infant Learning Progress Behavioral Repertoire for Handicapped Infants, are used upon entrance into the program and every three months thereafter. Additionally, observation data are recorded daily for priority behaviors. Family members are instructed and encouraged to collect data as they work with their children.

PROGRAM FOR PARENTS:

Staff members make weekly home visits. Family members are given written descriptions and demonstrations of procedures to be used to teach the children. The family members practice the activities while home trainers are present. Parent education meetings are held on an as-needed basis to provide information of general interest. When families require services beyond the scope of the project, staff members help family members obtain the services elsewhere. Family members are encouraged to observe and volunteer in the center-based program. Other types of involvement are also encouraged, including material construction, parent-to-parent interactions, newsletters, presentations to other groups, and participation on the advisory committee.

FEATURES AND PRODUCTS:

Training and dissemination efforts are focused on day-care workers who serve nonhandicapped children. This effort aims to increase the number of handicapped children in programs currently limited to nonhandicapped children. This objective will be accomplished through demonstration, training, and information packets.

Special Touch Preschool

ADDRESS: Special Touch Preschool
P.O. Box 1191
Powell, Wyoming 82435

PHONE: (307) 754-2864

YEAR OF FUNDING: 1

FISCAL AGENCY: Northwest Child Development Center

DIRECTOR: Virigina Fish
COORDINATOR: Diane Poirier
OTHER STAFF TITLES: teachers, teacher aide, physical therapist, speech therapist, home coordinator, home trainer, secretary

CHARACTERISTICS OF TARGET POPULATION:

The project serves about 25 children birth to age 3 years and 20 children age 3 to 5 years. The project focuses on severely handicapped and emotionally disturbed children, although moderately handicapped children are also served. Children with almost any handicapping condition are considered eligible to receive program services.

PROGRAM FOR CHILDREN:

Children birth to age 3 years are served in a home-based program, while children age 3 to 5 are served in either a self-contained classroom or a mainstream classroom. Those children enrolled in the home-based program are visited weekly for 90 minutes. During this time, the home trainer develops and implements programs for the child and trains the parent to carry out the program. Curriculum packages which may be used include the Curriculum and Monitoring System, the Teaching Research Curriculum for Moderately and Severely Handicapped, the Portage Guide to Early Education, and the Guide to Early Developmental Training. Instructional techniques used in all settings draw heavily upon cognitive and developmental theories, using behavioral principles to organize and evaluate the environment.

MEASURES OF CHILD PROGRESS:

Progress data are obtained on each child by recording responses to tasks stated in objective terms and by determining mastery of objectives. Pre- and posttests used to measure progress include the Bayley Scales of Infant Development, the McCarthy Scales of Children's Abilities, the Learning Accomplishment Profile, and the Curriculum and Monitoring System.

PROGRAM FOR PARENTS:

Individual education programs for each family indicate priority needs of individual children and the family as a whole. Parents receive systematic instruction in early education intervention. Parents and siblings may also participate in support groups. Parents help determine project direction, plan instructional programs for their children, and serve as primary intervention agents.

FEATURES AND PRODUCTS:

The project offers a model for demonstrating cost-effective use of ancillary personnel in rural areas, procedures for serving low-incidence handicapping conditions, and parent involvement innovations.

Samoa's Cooperative Outreach Project

ADDRESS: Special Education Division
Department of Education
Pago Pago, American Samoa 96799

PHONE: 011-684-633-1323

FISCAL AGENCY: Department of Education of American Samoa

DIRECTOR: Jane French
COORDINATOR: Peter Tinitali
OTHER STAFF TITLES: consulting teachers, outer islands liaison

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Department of Education

DESCRIPTION OF DEMONSTRATION MODEL:

Children birth to age 3 years with any handicap are served in a home-based program. Children age 3 to 6 years are served in a special center-based program. When possible, children are also served in existing Village Early Education Centers. Parents are actively involved in the formulation of individual education plans for their children. Parents receive training in intervention techniques both in the home and at the center.

MAJOR OUTREACH GOALS:

- To train village early childhood teachers to work with disabled children and their families.
- To develop a service delivery plan for early childhood special education services in the outer islands of Samoa.
- To increase community awareness.

MAJOR OUTREACH SERVICES:

Project staff members train and consult with regular early childhood teachers and provide technical assistance to Headstart programs. Staff members also help coordinate interagency services and help facilitate the development of an early childhood special education plan for the outer islands.

FEATURES AND PRODUCTS:

The project has a screening instrument that can be administered by teachers in the Village Early Education Centers.

* 1 site is reported to be using components of the project's demonstration model.

PASIT

Pasadena Area Special Infant and Toddler Project

ADDRESS: 1741 Silverlake Blvd.
Los Angeles, California 90026

PHONE: (213) 664-2937

FISCAL AGENCY: Child, Youth and Family Services

DIRECTOR:	Beatrice Gold
COORDINATOR:	Sheila Wolfe
OTHER STAFF TITLES:	early childhood special educator, registered occupational therapist, child development specialist, family specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
California Department of Developmental Services (Regional Center System) and the Pasadena Unified School District

DESCRIPTION OF DEMONSTRATION MODEL:
PASIT services are individualized to meet an agency's specific needs based on that agency's existing strengths. Agencies that are targets for PASIT's services currently serve children birth to age 5 years. The project plans to improve or extend their services to children who have a variety of handicapping conditions or are at high risk for developmental problems.

MAJOR OUTREACH GOALS:

- To improve and expand services for Pasadena's handicapped preschoolers.
- To replicate all or part of the PASIT model in other communities.
- To increase public awareness about and advocate for increased support for early intervention.
- To increase the availability of pertinent educational materials for semiliterate and developmentally disabled families of children with special needs.
- To develop an evaluation system to measure the impact of outreach activities.

MAJOR OUTREACH SERVICES:
PASIT conducts community presentations about early intervention and on-site training sessions for those interested in the PASIT model. The project also provides agencies with technical assistance to identify strengths, needs, and ability to serve young handicapped children and their families. Project staff members act as consultants in the areas of family assessment techniques, development of family oriented services, and implementation of a curriculum model based on individualization within a group setting and individual life styles. The project also provides other agencies with resource material on early intervention.

* 3 sites are reported to be using components of the projects demonstration model.

UCLA Intervention Program

ADDRESS: Room 23-10
1000 Veteran Avenue
Los Angeles, California 90024

PHONE: (213) 825-4821

FISCAL AGENCY: University of California at Los Angeles

DIRECTOR: Judy A. Howard
COORDINATOR: Lucinda P. Bernheimer
OTHER STAFF TITLES: research coordinator, educational director, teachers, physical therapist, occupational therapist, speech/language pathologist, social worker

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Infant Discretionary Fund, California Regional Centers, fundraising, and private insurance

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves 30 children birth to age 3 years in a center-based program with a home component. The children have a variety of handicaps and are integrated with nonhandicapped children in the toddler class. Play is valued as a learning process, and specific interventions are incorporated into individual play programs; occupational, physical, and speech therapists work in the classroom. The program includes a flexible model of parent involvement with a weekly support group. Progress is measured at six-month intervals using the Gesell Scales, videotaped measures of child and parent interaction and the child at play, and the Parent Behavior Progression.

MAJOR OUTREACH GOALS:

- To promote an understanding among medical personnel, educators, and social service providers so they may coordinate early intervention services.
- To promote an understanding in the professional community of the need for an individualized approach to parent involvement in programs serving young handicapped children and their families.
- To demonstrate to the professional community the value of integrating handicapped and nonhandicapped children.

MAJOR OUTREACH SERVICES:

The project trains medical personnel and students from many disciplines; conducts workshops and conferences for the professional community; coordinates their services with local school districts; and consults with state agencies.

FEATURES AND PRODUCTS:

Project staff members are available as consultants in these areas: interdisciplinary approach to early intervention; the development of a flexible model of parent involvement; and the integration of nonhandicapped and handicapped young children. A library of videotapes has been developed to use as training aids. Articles and questionnaires related to the three major goals of outreach are available for dissemination.

* 15 sites are reported to be using components of the project's demonstration model.

ICN Interact Project

ADDRESS: Child Development Center
Children's Hospital Medical Center
51st and Grove Streets
Oakland, California 94609

PHONE: (415) 428-3351

FISCAL AGENCY: Children's Hospital Medical Center

DIRECTOR: Nancy Sweet
COORDINATORS: Kathy VandenBerg and Bette Flushman
OTHER STAFF TITLES: infant development specialist, follow-up nurse specialist, physical therapist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

State health funds (California Children's Services) and third-party payment (medical insurance)

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves medically high-risk infants birth to age 1 year who are chronically hospitalized at birth in a tertiary intensive care nursery (ICN). Developmental intervention begins in the ICN and continues during the first year in a neonatal follow-up program. Targets for intervention are infants (predominantly premature), parents, and ICN nurses. Assessments include the Assessment of Preterm Infant Behavior, the Brazelton Newborn Assessment Scale, and the Bayley Scales of Infant Development.

MAJOR OUTREACH GOALS:

- To stimulate public awareness of and state involvement in the need for new and improved services for high-risk newborns.
- To stimulate and assist replication of the project's model.
- To provide a multilevel professional in-service training program.
- To disseminate materials developed by the project.

MAJOR OUTREACH SERVICES:

The project conducts orientation workshops on developmental intervention in the ICN and intensive two-day training sessions for key ICN follow-up staff. The project also serves as a training site for assessment of preterm infant behavior. ICN Interact provides training materials for parents, nurses, and infant development specialists who work in ICNs.

FEATURES AND PRODUCTS:

The project has available training materials for nurses, infant development specialists, and parents involved in developmental intervention in an ICN. Project staff members have unique expertise in assessment and intervention with tiny premature infants in the ICN, and in preparation of infant development specialists from all backgrounds for a developmental role in the ICN. Evaluation results support the need for intervention with chronically hospitalized newborns and show that intervention does have an impact on the behavior of the infant in the ICN.

* 5 sites are reported to be using components of the project's demonstration model.

SPEED

System for Planning, Evaluation and Efficacy Demonstration

ADDRESS: California Institute for Human Services
Sonoma State University
Rohnert Park, California 94928
PHONE: (707) 664-2416

FISCAL AGENCY: Sonoma State University Academic Foundation, Inc.

DIRECTOR: Thomas P. Cooke
OTHER STAFF TITLES: institute director

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agency and the Napa County Superintendent of Education

DESCRIPTION OF DEMONSTRATION MODEL:
Project SPEED provides consultation, training, and technical assistance to infant and early intervention projects in the areas of program planning, development and evaluation.

MAJOR OUTREACH GOALS:
- To stimulate high-quality early intervention programs.
- To support the goals of other programs by offering supplemental technical assistance.

MAJOR OUTREACH SERVICES:
The project provides program planning services (needs assessment, budget preparation, cost-effectiveness analysis, proposal writing), staff training services (pre-service, in-service, placement exchange), and program evaluation services (data collection, analysis, design, and evaluation reports).

FEATURES AND PRODUCTS:
This project provides technical assistance, developed through the demonstration model, in crucial areas of program planning and implementation.

* 12 sites are reported to be using components of the project's demonstration model.

Project MORE

Mainstreamed Outreach and Resources for Educators

ADDRESS:
Family Service Agency of San Francisco
Developmental Services Department
2730 Bryant Street
San Francisco, California 94110

PHONE: (415) 641-4905
282-1090

FISCAL AGENCY: Family Service Agency of San Francisco

DIRECTOR: Judith Lewis
COORDINATOR: Anna Irvine
OTHER STAFF TITLES: training specialists, program assistant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

San Francisco Unified School District (LEA), Golden Gate Regional Center (State Department of Developmental Services), State Office of Child Development, United Way, and a private foundation

DESCRIPTION OF DEMONSTRATION MODEL:

The educational and therapeutic day-care model is based on components of mainstreaming of handicapped children age birth to 5 years, center teaching, parent participation, and specialist consultant services. The Bayley Scales, Memphis Developmental Scale, and the Hawaii Early Learning Profile (HELP) and Activity Guide are used for assessments, and individual education plans are planned every six months.

MAJOR OUTREACH GOALS:

- To increase the availability of high-quality educational programs for young handicapped children.
- To provide training and technical assistance to personnel from ten or more replication sites.
- To provide program development assistance to ten or more programs seeking to develop or improve services in a mainstream setting through adoption of one or more model components.
- To reach 100 or more additional targets through awareness activities.

MAJOR OUTREACH SERVICES:

Project MORE offers a 13-week training program with on-site classroom consultation; awareness activities that include workshops and dissemination of published materials; technical assistance to potential replicators across seven component areas; use of a demonstration mainstreamed day-care program as a state training site; participation in state and community advocacy efforts; and transition assistance for children progressing from self-contained special settings to mainstream settings.

FEATURES AND PRODUCTS:

Outreach efforts are focused on helping day-care and early education programs mainstream handicapped children. A set of 13 training manuals with a multicultural/multilingual focus is available. A special effort is made to reach multicultural and multilingual staff and children. College credit is available for the training program.

* 25 sites are reported to be using components of the project's demonstration model.

INREAL/Outreach

ADDRESS: Campus Box 409
University of Colorado
Boulder, Colorado 80309

PHONE: (303) 492-8727

FISCAL AGENCY: University of Colorado

DIRECTOR: Rita S. Weiss
COORDINATOR: Elizabeth A. Heublein
OTHER STAFF TITLES: trainers, office manager

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
University of Colorado and local contributions from participating agencies

DESCRIPTION OF DEMONSTRATION MODEL:

INREAL (INclass REActive Language) was an HCEEP demonstration project from 1974 through 1977. The major goal of the project was to improve the language and related learning skills of 3- to 5-year-olds, including bilingual (Spanish-English) children. The INREAL method of intervention follows a naturalistic, nonstigmatizing model.

MAJOR OUTREACH GOALS:

- To replicate or adapt the INREAL model to individual agency needs.
- To certify INREAL specialists and trainers.
- To provide a model to unify regular and special education personnel.

MAJOR OUTREACH SERVICES:

The project provides pre-service, in-service, and INREAL certification training from the INREAL home office and regional centers. The regional centers are located in California, Kansas, New Mexico, and Minnesota. Training is also provided by 15 second-generation trainers in Colorado and other states.

FEATURES AND PRODUCTS:

Products developed include training videotapes, a manual, the NewsREAL newsletter, and the INREAL Training Evaluation Model. Demonstration data show that INREAL intervention improves language development in the experimental group. Longitudinal data show that use of the INREAL method at preschool and kindergarten levels results in a greatly reduced need for later remedial services. Cost effectiveness data are available in Weiss, R.S., INREAL Intervention for Language Handicapped and Bilingual Children, Journal of the Division for Early Chidlhood, 4, 40-51, 1981; and McNulty, B., Smith, D., and Soper, E., Effectiveness of Early Special Education for Handicapped Children, a report commissioned by the Colorado General Assembly, 1983.

* 100 sites are reported to be using components of the project's demonstration model.

Project UPSTART

ADDRESS: 3640 Martin Luther King, Jr., Avenue, S.E. PHONE: (202) 563-0410
Washington, D.C. 20032

FISCAL AGENCY: Easter Seal Society for Disabled Children and Adults, Inc.
(District of Columbia Society for Crippled Children)

DIRECTOR: D. Lee Walshe
COORDINATOR: Joan Frain
OTHER STAFF TITLES: occupational therapist, special educational specialist, speech pathologist consultant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

District of Columbia Society for Crippled Children, private foundations, Developmental Disabilities

DESCRIPTION OF DEMONSTRATION MODEL:

Based on the rationale that improvement of neuro-sensorimotor function will contribute to educational progress, Project UPSTART weaves techniques of neuro-developmental therapy and sensory integration into the educational program. The classroom operates two or three weekly three-hour intervention periods and provides training in all curriculum areas. The project developed a plan for service delivery along a neuro-sensorimotor sequence and uses this program to develop individual plans for each child. The gross- and fine-motor program is integrated into the classroom structure and includes individual handling, positioning, and control of the sensory environment through therapeutic intervention. The project measures child progress with the GMRD, REEL, and Early LAP.

MAJOR OUTREACH GOALS:

- To expand services to Washington, D.C., and suburban and rural areas of Maryland.

MAJOR OUTREACH SERVICES:

The project provides training and consultation to four classrooms at Washington, D.C., and three classrooms at Charles County and Montgomery County, Maryland.

FEATURES AND PRODUCTS:

Project UPSTART developed the "Parent Help Wanted and Help Received" questionnaires. The Sequence Neuro-Sensorimotor Program, a method of service delivery which prepares the severely handicapped child for learning, is available. A patent is pending on a positioning and handling device for profoundly handicapped individuals.

* 11 sites are reported to be using components of the project's demonstration model.

Rutland Center Developmental Therapy Model Outreach Project

ADDRESS: 125 Minor Street
Athens, Georgia 30606
PHONE: (404) 542-6076

FISCAL AGENCY: University of Georgia

DIRECTOR: Karen R. Davis
OTHER STAFF TITLES: training associate, training associate/evaluator, accounting assistant, senior secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Georgia Department of Education

DESCRIPTION OF DEMONSTRATION MODEL:

Developmental Therapy is a psychoeducational curriculum for teaching young children with severe emotional and behavioral disorders. The approach is particularly pertinent for children age 2 to 8 years and is applicable to children of varying ethnic and socioeconomic groups. The basic curriculum areas are behavior, communication, socialization, and preacademics. Within each of these areas, a series of developmental objectives are sequenced into stages of therapy. The project uses these objectives as a measure of child progress.

MAJOR OUTREACH GOALS:

- To stimulate growth of specialized, high-quality services to seriously emotionally disturbed and other handicapped children age 2 to 8 years and their parents and teachers.
- To offer technical assistance to selected target audiences and individuals to facilitate the use of the Rutland Center Developmental Therapy Model.

MAJOR OUTREACH SERVICES:

The project assists in program planning and design, staff development, identification and referral processes, intake and diagnostics, Developmental Therapy curriculum, school liaison, parent services, and staff evaluation. In addition, the project disseminates information and helps establish effective evaluation systems.

FEATURES AND PRODUCTS:

Materials available include textbooks, films, videotapes, filmstrips, and brochures. Social-emotional goals are objectives for the psychoeducational curriculum.

* 89 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Idaho Outreach

ADDRESS:
University of Idaho
Department of Special Education
Moscow, Idaho 83843

PHONE: (208) 885-6159

FISCAL AGENCY: University of Idaho

DIRECTOR: Dale Gentry
COORDINATOR: Jennifer Olsen
OTHER STAFF TITLES: project manager, trainers

SOURCE OF CONTINUATION FUNDING:
Van Skike Trust Fund

DESCRIPTION OF DEMONSTRATION MODEL:

The preschool model serves children birth to age 5 years with moderate and severe handicaps. Programming is determined by each child's strengths and needs, parent input, accessibility to the center, and assessment information. A functional curriculum approach based on the theory of systematic instruction is used to determine daily programs and daily data collection procedures. Strategies for involving parents in varying capacities are implemented based on the individual needs of the families. A transdisciplinary approach is used.

MAJOR OUTREACH GOALS:

- To increase awareness of the need for early intervention programs within Idaho.
- To revise and disseminate major project materials (i.e., assessment tools, the parent involvement package, guidelines for application of systematic instruction procedures) to the preschool setting.
- To provide technical assistance to preschool sites throughout the state.
- To facilitate a statewide task force on early education for handicapped children.

MAJOR OUTREACH SERVICES:

The project sponsors a state task force on early education for handicapped children and participates in training workshops throughout the state that are sponsored by agencies currently responsible for serving handicapped children birth to age 5 years. The project also provides pre-service training to elementary and special education students in the areas of early childhood education, systematic instruction, and parent/professional relations.

FEATURES AND PRODUCTS:

The project works with handicapped children in a rural, sparsely populated area. Products developed by the project include: a parent involvement package of three 20-minute videocassettes and a training manual, a teacher training manual on the social skills curriculum for preschool children, a manual on the application of systematic instruction procedures to the preschool setting, and a manual on delivering sensitive information to parents.

* 16 sites are reported to be using components of the project's demonstration model.

PEECH

Precise Early Education for Children with Handicaps

ADDRESS: University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820

PHONE: (217) 333-4894

FISCAL AGENCY: University of Illinois

DIRECTOR: Merle B. Karnes
COORDINATOR: Wendy Boyce Sercombe
OTHER STAFF TITLES: replication specialist, evaluator, materials developer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Joint agreement between Rural Champaign County Education Cooperative and the University of Illinois

DESCRIPTION OF DEMONSTRATION MODEL:

PEECH is a center-based program serving handicapped children age 3 to 5 years and their families. Although the mildly to moderately handicapped are the project's primary population, procedures have been adapted for lower-functioning, sensory-impaired children. The project obtains pre- and posttest data on all children. Teachers assess each child's abilities using the Systematic Child Observation and Assessment for Programming (SCOAP) instrument, set individual goals and objectives, and continually evaluate child progress.

MAJOR OUTREACH GOALS:

- To train personnel to develop, implement, and demonstrate a model early education program for preschool handicapped children.
- To prepare and disseminate materials to help early childhood personnel educate handicapped children.

MAJOR OUTREACH SERVICES:

PEECH provides intensive training to each year's replication site and presents component workshops on topics relevant to early childhood special education. The project mails materials to interested professionals throughout the United States.

FEATURES AND PRODUCTS:

The project developed the SCOAP child assessment instrument and provides the instrument to replication sites. PEECH has also developed classroom and parent activity manuals and numerous handouts on relevant topics in early childhood special education.

* 55 sites are reported to be using components of the project's demonstration model.

JDRP-approved

RAPYHT

Retrieval and Acceleration of Promising Young Handicapped and Talented

ADDRESS:
University of Illinois
Colonel Wolfe School
403 East Healey
Champaign, Illinois 61820

Phone: (217) 333-4894

FISCAL AGENCY: University of Illinois

DIRECTOR: Merle B. Karnes
COORDINATOR: Wendy Boyce Sercombe
OTHER STAFF TITLES: replication specialist, evaluator, materials developer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Joint agreement between Rural Champaign County Education Cooperative and the University of Illinois

DESCRIPTION OF DEMONSTRATION MODEL:

The RAPHYT model is a complete approach to screening, identifying, and programming for individual gifted and talented handicapped children and general programming for all children age 3 to 5 years. The model is effective in a variety of preschool special education settings. Direct services are provided to teachers who assess and improve individual talent area capabilities. The program also offers information and materials to the families of children identified as gifted and talented. Pre- and posttest data obtained on all children, offer additional areas of emphasis for programming.

MAJOR OUTREACH GOALS:

- To train site personnel to screen, identify, assess, and provide appropriate educational services for gifted and talented handicapped preschool children.
- To facilitate awareness and disseminate materials in order to provide improved services for gifted and talented handicapped preschoolers.

MAJOR OUTREACH SERVICES:

Project staff members regularly visit replication sites and provide in-service training workshops and printed materials necessary to implement the RAPHYT model.

FEATURES AND PRODUCTS:

Results from previous research support the contention that RAPYHT programming promotes growth in creative thinking, social functioning, motivation to achieve, and other more specific talent areas (leadership, performing arts, fine arts, academics, psychomotor skills). The Nurturing Talent guides, General Programming Manual, and Talent Assessment for Program Planning and Talent Activities manuals have been developed and are available to replication sites.

* 31 sites are reported to be using components of the project's demonstration model.

Macomb 0-3 Regional Project

A Rural Child/Parent Service

ADDRESS: 27 Horrabin Hall
Western Illinois University
Macomb, Ilinois 61455

PHONE: (309) 298-1634

FISCAL AGENCY: Western Illinois University

DIRECTOR: Patricia L. Hutinger
COORDINATOR: Bonnie Smith-Dickson
OTHER STAFF TITLES: training coordinator, trainer/evaluator, consultant/trainer, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

State Department of Mental Health/Developmental Disabilities (McDonough County Rehabilitation Center and Fulton County Community Workshop and Training Center, Inc.)

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides a home-based remediation and education service to handicapped children birth to age 3 years and their families. This rural service model provides home visits and a Sharing Center which incorporate child activities, topics of study for parents, and water activities. Parents are involved in all components. The model project demonstrates significant practical and statistical child gains based on core curriculum activities.

MAJOR OUTREACH GOALS:

- To increase or improve high-quality specialized services in rural areas to handicapped and high-risk children birth to age 3 years and their parents.
- To develop an effective outreach model for rural communities.
- To ensure the continuation of services to handicapped children birth to age 3 years by helping early childhood programs develop plans to evaluate and document program effectiveness.

MAJOR OUTREACH SERVICES:

Services include awareness-building activities; stimulation of replication sites; training of other providers; consultation; national, state, and local involvement and coordination; product development, refinement, and revision; evaluation and documentation planning; and HCEEP Rural Network activities.

FEATURES AND PRODUCTS:

Parents are involved in all activities. The Sharing Center, a unique component of the program, is a popular and effective way to bring parents and children together to engage in learning activities. The project has developed and sells Baby Buggy books and papers. A series of videotapes and slide-tapes are available for rent. The Macomb 0-3 Project Core Curriculum, a functional curriculum with adaptations for hearing-impaired and visually and motorically impaired children, is available for sale.

* 17 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Peoria 0-3 Outreach Project

ADDRESS: 320 E. Armstrong Avenue
Peoria, Illinois 61603

PHONE: (309) 672-6358

FISCAL AGENCY: United Cerebral Palsy of Northwestern Illinois

DIRECTOR: Kriss Montgomery
COORDINATOR: Beth Brown
OTHER STAFF TITLES: motor coordinator, child development specialist, resource specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Department of Mental Health/Developmental Disabilities, United Way, service fees (parent sliding scale and third-party payers), and contributions

DESCRIPTION OF DEMONSTRATION MODEL:
Services are based on a developmental task analysis approach to prescriptive teaching and are delivered primarily in the home by parents. The program serves mildly to severely developmentally delayed children birth to age 3 years and their families. The service program's components include: awareness and identification of young handicapped children; comprehensive diagnostic and evaluation services; individual education plan development and home-based programming using the Functional Profile to assess child progress; center-based programming; occupational, physical, and speech and language therapy; and parent education and support.

MAJOR OUTREACH GOALS:

- To improve the quality of intervention services to developmentally delayed children birth to age 3 years and their families.
- To provide on-site technical assistance, training, and supplemental materials to agencies initiating or expanding services based on the Peoria 0-3 Model.
- To demonstrate a comprehensive system adaptable to rural and urban settings.
- To develop materials to increase awareness and help development of programs for unserved and underserved handicapped infants and toddlers and their families.

MAJOR OUTREACH SERVICES:
The project provides technical assistance and training to replicating sites and uses the Peoria 0-3 Replication Rating Scale as a guide to identify areas for training and to measure training effectiveness. Awareness, introductory, and topical workshops are held each year at the local, state, regional, and national levels. The project also disseminates thousands of materials each year.

FEATURES AND PRODUCTS:
The project has developed the Functional Profile (an assessment instrument and curriculum planning tool for children birth to age 6 years) and an extensive list of written handouts and videotapes on motor skills, speech and language, and parent education and support. A quarterly newsletter is available by subscription ($3).

* 140 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Project RHISE/Outreach
Rockford Handicapped Infant Services Expansion

ADDRESS: Children's Development Center
650 North Main Street
Rockford, Illinois 61103

PHONE: (815) 965-6745

FISCAL AGENCY: Children's Development Center

DIRECTOR: Steven Lynn Smith
COORDINATOR: Jonah Deppe
OTHER STAFF TITLES: training consultants, parent-infant educators, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Illinois Department of Mental Health/Developmental Disabilities, United Way, County 708 Board, fees, gifts, and contributions

DESCRIPTION OF DEMONSTRATION MODEL:
The demonstration program serves handicapped infants birth to age 3 years and their families in a range of settings including the home, satelite sites, and the center. The project's Consultancy model is a transdisciplinary approach in which the expertise of a variety of specialists is transmitted to the child and family by one team member through ongoing in-service training and consultation. Community awareness and a strong organizational framework round out the comprehensive program. Clinical consultants measure child progress through standardized assessments and the parent-infant educators use the Rockford Infant Development Evaluation Scales (RIDES) to document child progress.

MAJOR OUTREACH GOALS:

- To develop comprehensive, high-quality programs for handicapped infants and their families.
- To improve the quality of early intervention services through long-term training and topical workshops.
- To develop and disseminate materials which will increase public awareness of early intervention and which will help improve the quality of services.

MAJOR OUTREACH SERVICES:
Technical assistance includes program needs assessments, long-term training for model replication, short-term training and workshops on specific topics, on-site consultation, observation and training at the Children's Development Center (demonstration site), product dissemination, and information services.

FEATURES AND PRODUCTS:
The Consultancy Model and the project's parent program are being replicated in both rural and urban settings. Available materials include a revised curriculum syllabus, RIDES, a child development chart, parent readiness levels, parent needs assessment packages, parent learning packages, "Discovery" and "Parent to Parent" (filmstrips developed by parents), "Hello Somebody . . ." (film about early intervention), Child Find Workshop Proceedings, biliographies, and articles describing the program.

*36 sites are reported to be using components of the project's demonstration model.

Project FINIS Outreach

Families with Infants in Networks of Interactional Support

ADDRESS: 210 South 12th Avenue
Marshalltown, Iowa 50158

PHONE: (515) 752-0103

FISCAL AGENCY: Area Education Agency 6

DIRECTOR: Damon L. Lamb

OTHER STAFF TITLES: social worker, occupational therapist, speech/language clinician, teacher of preschool handicapped

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Area Education Agency 6

DESCRIPTION OF DEMONSTRATION MODEL:

The center-based program serves handicapped infants and toddlers and their families and delivers services at three levels: individual (infants and toddlers), dyadic (child-caregiver), and systemic (family). Services for infants and toddlers are transdisciplinary and data based (West Virginia Data Recording System). The project has also implemented a newborn high-risk registry in hospital obstetric units. Services provided to the family include: support and discussion groups, respite care, family life education classes, and family therapy.

MAJOR OUTREACH GOALS:

- To provide technical assistance and training in the family systems model for early childhood special education.
- To develop, refine, and disseminate products related to early childhood special education.
- To promote early childhood special education services at the individual, dyadic, and systemic levels of family organization.
- To evaluate the effectiveness of outreach services.

MAJOR OUTREACH SERVICES:

Project FINIS Outreach offers workshops on specific topics related to services to handicapped infants and toddlers and their families. On-site and off-site training is available at both pre-service and in-service levels. Technical assistance in the area of program planning is available to administrative personnel.

FEATURES AND PRODUCTS:

Project FINIS applies the principles of family development theory and systems theory to deliver services; developmental intervention is also provided within the context of the family. Structured interview procedures are used to assess family systems (boundaries, subsystems, hierarchies, alliances), and an Interactional Analysis Scale developed by the project assesses interactions between infant and caregiver. Materials developed by the project include: Project FINIS Procedures Manual; Approaches to Early Identification of Potential Special Needs Children; Infant-Caregiver Interactions: Assessment and Intervention; Family Assessment; Sensorimotor Development: A Curriculum Supplement for Parent Education Programs; and Family Life Education: A Curriculum Supplement for Parent Education Programs. The project's research documenting child progress and an analysis of model costs are also available.

* 5 sites are reported to be using components of the project's demonstration model.

PEEEC

Project for Early Education of Exceptional Children

ADDRESS: West Kentucky Educational Cooperative
Special Education Building
Murray State University
Murray, Kentucky 42071

PHONE: (502) 762-6965

FISCAL AGENCY: West Kentucky Educational Cooperative

DIRECTOR: Melba Casey
COORDINATOR: Jerri A. Millican
OTHER STAFF TITLES: project manager

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Calloway County and Caldwell County schools, state funds, and EHA-B funds

DESCRIPTION OF DEMONSTRATION MODEL:

PEEEC offers home- and center-based services to multihandicapped and some high-risk children age 3 to 8 years. The project uses diagnostic-prescriptive methods of intervention and provides annual screening for preschoolers in the community. Individual parent services are based on needs assessments.

MAJOR OUTREACH GOALS:

- To develop and implement an effective outreach model.
- To provide training and technical assistance to early childhood providers in order to ensure comprehensive educational planning and to stimulate high-quality programs in western Kentucky and other designated sites.
- To provide awareness activities to increase services.
- To develop and distribute products to enhance the quality of services.
- To stimulate state involvement in the support and provision of programs.

MAJOR OUTREACH SERVICES:

The project provides training and technical assistance (workshops and on-site consultations) and disseminates products and information to interested sites.

FEATURES AND PRODUCTS:

The project is represented on the Kentucky State Advisory Committee for Handicapped Services in Head Start. Project staff members are working with the Kentucky Department of Education's Bureau of Education for Exceptional Children, the Head Start Training Facility, and the Kentucky Department of Human Resources to stimulate statewide interagency coordination. Staff members are also actively involved in the State Federation Division of Early Childhood. The project has developed the Preschool Screening Procedures Manual and the Home School Instruction Program Manual.

* 25 sites are reported to be using components of the project's demonstration model.

Outreach: Louisiana Curriculum for Infants with Handicaps

ADDRESS: LSUMC
Human Development Center
1100 Florida Ave., Bldg. #119
New Orleans, Louisiana 70119

PHONE: (504) 948-6881

FISCAL AGENCY: LSU Medical Center

DIRECTOR: Patsy Poche
COORDINATOR: Marcia Lobman
OTHER STAFF TITLES: project specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Louisiana State Department of Education

DESCRIPTION OF DEMONSTRATION MODEL:

An interdisciplinary center-based and home/center-based intervention program serves children from birth to age 3 years diagnosed as handicapped according to the state Department of Education. Children represent a wide range of handicapping conditions. Individualized programs are built from documentation found in the project-developed Louisiana Curriculum for Infants with Handicaps and augmented by appropriate therapeutic techniques. Progress data is collected on a daily basis for each curriculum activity.

MAJOR OUTREACH GOALS:

- To replicate selected components of the demonstration model and field-test the Louisiana Curriculum for Infants with Handicaps.
- To refine and revise the Louisiana Curriculum for Infants with Handicaps based on field-test data.
- To increase the number and quality of educational programs and services to infants with handicaps within Louisiana.

MAJOR OUTREACH SERVICES:

The project provides technical assistance to new and existing infant programs throughout the state. Staff training is provided to all field-test sites in order to enable staff to implement the Louisiana Curriculum for Infants with Handicaps.

FEATURES AND PRODUCTS:

The Louisiana Curriculum for Infants with Handicaps contains activities in the gross-motor, fine-motor, self-help, cognitive communication, and social-emotional domains. The manual describes the theoretical orientation and the implementation strategies for the curriculum. The package includes curriculum placement instruments for each domain, instructions where applicable, communication sampling methods, curriculum and placement coding indexes for each domain, and a universal data collection form to be used with all curriculum activities.

* 16 sites are reported to be using components of the project's demonstration model.

Washington County Children's Program

ADDRESS: P.O. Box 311
Machias, Maine 04654
PHONE: (207) 255-3427

FISCAL AGENCY: Child and Youth Board of Washington County

DIRECTOR: Jane Weil
OTHER STAFF TITLES: training coordinator, product development coordinator, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Title XX, contracts, Bureau of Mental Health, local funds, Department of Education, Bureau of Mental Retardation, Medicaid, and small foundation and church grants

DESCRIPTION OF DEMONSTRATION MODEL:

WCCP began as a home-based model and has expanded to include group experiences for children and parents. Group placement in normal group settings (Head Start, family day care, nursery schools) is emphasized. In areas where no groups exist, WCCP staff members form groups for children and parents.

MAJOR OUTREACH GOALS:

- To provide training to increase the number and quality of services.
- To affect policy, legislation, and funding decisions at the state level.
- To develop and disseminate print and audio materials.
- To increase public awareness.

MAJOR OUTREACH SERVICES:

The project works closely with Maine's interdepartmental coordination system for 3- to 5-year-old handicapped children. Planning steps are being taken to improve and increase services to children birth to age 3 years; train day-care and nursery school staffs who mainstream; and publish reading material for parents, educators, and child health personnel.

FEATURES AND PRODUCTS:

The project has produced the Language, Speech, & Hearing Interview; the Preschool Group Evaluation Checklist; Special Needs Children in Family Day Care; A Handbook for Helping Parents "Group"; "US IN A BUS"; A Handicapped Child in the Family; Helping Children Grow; Helping Parents Grow; taped interviews with parents of handicapped children; Policies & Procedures Manual; Helping Professionals Grow; Helping Projects Grow: Public Service Announcements; Helping Projects Grow: Getting Books to People; and Helping Families Grow.

* 3 sites are reported to be using components of the project's demonstration model.

Project WELCOME Outreach

ADDRESS: Wheelock College
200 The Riverway
Boston, Massachusetts 02215

PHONE: (617) 745-5200
ext. 160

FISCAL AGENCY: Wheelock College

DIRECTOR: Linda Gilkerson
COORDINATOR: Jean G. Cole
OTHER STAFF TITLES: assistant to director, developmental trainer, parent specialist, social work specialist, early intervention specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Five demonstration hospitals in the Boston area

DESCRIPTION OF DEMONSTRATION MODEL:

Project WELCOME serves high-risk prematurely born infants and their parents through a family support program, a Developmental Consultation Program for families and nurses, and an Outreach/ Liaison Program (seminars, tours, workshops, and print materials). The project uses the Brazelton Neonatal Assessment Scale and the Assessment of Premature Infant Behavior Scale.

MAJOR OUTREACH GOALS:

- To improve services to high-risk prematurely born infants and their families.
- To increase the networking among health and early intervention agencies.
- To offer training and consultation in developmental assessment and care of the hospitalized premature infant, health needs of premature infants and toddlers, family support, early intervention for premature infants, collaboration between health care and early intervention, and time management for implementing change.

MAJOR OUTREACH SERVICES:

The project offers a range of services to all neonatal intensive care units (NICU) in Massachusetts, their major referring hospitals, and to key early intervention programs. Specific activities are determined by a needs assessment at each site and include: a ten-week interdisciplinary course; a mini-course for NICU staff; and workshops and seminars on training trainers, parent support, health and long-term developmental needs of premature infants, and agency networking.

FEATURES AND PRODUCTS:

The project has produced Premies as Older Infants and Toddlers, Discharge Planning for High-Risk Infants, Developmental Intervention in a Special Care Nursery: a New Approach to Providing Care for the Preterm Infant, Rethinking our Approach to Disabilities, Integrating Preterm Infants and Their Families into Early Intervention Programs, After Neonatal Intensive Care: Helping Parents Deal with Ongoing Issues, Documenting Developmental Assessment and Interventions for High-Risk Infants, The Early Years: A Guide for Parents of Premature Infants, Organizing Support Programs for Parents of Premature Infants, Facilitating Access to Early Intervention Programs: Developing and Distributing a Resource Guide, The Competent Premie Pamphlet (boy and girl versions, Spanish version), and a Directory of Early Intervention Programs in Massachusetts.

* 13 sites are reported to be using components of the project's demonstration model.

Project Optimus/Outreach

ADDRESS: 77B Warren Street
Brighton, Massachusetts 02135
PHONE: (617) 783-7300

FISCAL AGENCY: South Shore Mental Health Center

DIRECTOR: Geneva Woodruff
COORDINATOR: Jeanne Mankus
OTHER STAFF TITLES: parent coordinator, therapeutic coordinator, administrative assistant, speech consultant, motor consultant

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Third party payments, Title XX funds, 89-313 contract, state mental health contract, and donations

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration component is a center- and home-based program for handicapped children birth to age 3 years and their families. The project uses a modified transdisciplinary approach with a primary provider for direct services and a team to assess, plan, and evaluate. Staff members measure child progress every three months using developmental assessment and observation.

MAJOR OUTREACH GOALS:

- To train program administrators and personnel in the transdisciplinary model.
- To provide quality services to handicapped children, particularly those with moderate to severe disabilities.

MAJOR OUTREACH SERVICES:

Workshops, replication services, technical assistance, and materials development constitute the major portion of the project's training efforts.

FEATURES AND PRODUCTS:

Materials developed by the project include: The Parent Involvement Manual; The Policies and Procedures Manual; and slide tapes on the transdisciplinary service delivery model, parental involvement, and the ARENA assessment in a transdisciplinary service delivery model.

* 58 sites are reported to be using components of the project's demonstration model.

ERIN Outreach Program

Early Recognition Intervention Network

ADDRESS: 376 Bridge Street
Dedham, Massachusetts 02026

PHONE: (617) 329-5529

FISCAL AGENCY: Early Recognition Intervention Network, Inc.

DIRECTOR: Marian Hainsworth
COORDINATOR: Ellen French
OTHER STAFF TITLES: training specialists, administrative assistant, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local public schools

DESCRIPTION OF DEMONSTRATION MODEL:

The ERIN system is validated for special and regular education settings. The specialized combination preschool and home programs serve children age 2 to 7 years with moderate to severe special needs. The regular early childhood and primary K-1 program serves mildly to moderately handicapped children who are integrated with nonhandicapped peers. ERIN is a comprehensive system including childfind/screening, assessment, individual education program development, curriculum strategies and techniques, parent involvement, and resource coordination.

MAJOR OUTREACH GOALS:

- To increase the number of children served and to improve the quality of programs using the ERIN model.
- To help 20 outreach sites in seven states develop quality replications of the ERIN model.
- To improve and disseminate ERIN print and audiovisual material.
- To provide appropriate leadership and teacher training programs.

MAJOR OUTREACH SERVICES:

ERIN conducts five-day Leadership Training Institutes for trainers, coordinators, and teachers at ERIN or at regional locations. The project provides additional training and support to trainers and implementers via special topic workshops. The project makes two to four on-site visits to each replication program. ERIN is developing self-study training print and audiovisual materials and is disseminating awareness materials.

FEATURES AND PRODUCTS:

Project-developed materials include: Preschool Screening Systems, a child test and parent questionnaire; Developmental Inventory of Learned Skills, a criterion-referenced checklist for children birth to age 8 years; Implementing the ERIN Program (Teacher Kits with units on environment, evaluation and screening, planning, and teaching); and curriculum guides and materials on teaching participation, language, visual-perceptual-motor, body awareness, and control skills. A list of products is available from ERIN.

* 100 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Project Outreach U.S.A.

ADDRESS: International Institute for
Visually Impaired, 0-7, Inc.
14 Gay Street
Newtonville, Massachusetts 02160

PHONE: (617) 527-0476

FISCAL AGENCY: International Institute for Visually Impaired, 0-7, Inc.

DIRECTOR: Sherry Raynor

OTHER STAFF TITLES: education coordinator, parent coordinator, media consultant, other consultants

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves blind and visually impaired children birth to age 3 years. Project staff members act as consultants; offer in-service training; develop and disseminate materials; and increase the public's awareness of the effect of blindness and visual impairment on growth, development, and learning.

MAJOR OUTREACH GOALS:

- To assist and encourage the development of quality programs for children who are blind or have visual impairments (0-3).
- To assist and encourage improvement of existing programs.
- To broaden awareness in parents and professionals of the effect of blindness and visual impairment on growth, development and learning.
- To establish linkage and provide assistance for training programs to increase awareness of the unique needs of the blind and visually impaired infant and young child (0-3).

MAJOR OUTREACH SERVICES:

Project staff members identify agencies desiring assistance and provide consultation, in-service training, and demonstration (through model site use). The project also identifies existing materials, develops awareness materials, and refines and field-tests materials developed during demonstration funding.

Detroit's Preschool Pupil/Parent/Professional Outreach Project

ADDRESS:	Office of Federal/State Special Programs Detroit City School District 5057 Woodward Avenue Detroit, Michigan 48202	PHONE: (313) 494-1690
FISCAL AGENCY:	Early Recognition Intervention Network, Inc.	
DIRECTOR:	Beverly Johnson	
COORDINATOR:	Sharon Finerty	

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Detroit Public Schools

DESCRIPTION OF DEMONSTRATION MODEL:

The demonstration model serves educable mentally impaired pupils age 3 to 7 years. Five model classrooms serve children age 3 to 5 years, and four classrooms serve children age 5 to 7 years. The preschool classrooms with the local Head Start program facilitate mainstreaming opportunities. The curriculum stresses the development of language and reading skills. Parents observe in the classrooms and attend educational workshops.

MAJOR OUTREACH GOALS:

- To develop and maintain a dissemination unit for the 100 schools in the three-county greater Detroit area.
- To coordinate outreach activities with the Michigan state education agency.
- To disseminate project materials to other states.
- To provide materials and consultation to other agencies and parent groups in the area (especially private nonprofit agencies).

MAJOR OUTREACH SERVICES:

The project disseminates a manual and conducts workshops (with videotapes) on all aspects of the model. Staff members also give presentations at state and national conferences and consult with other agencies (especially concerning services to culturally diverse populations).

FEATURES AND PRODUCTS:

The project's model involves an "experience approach" to develop language and reading skills. Parent involvement activities include a "For Men Only" support group and field trips for parents and children. Products include a 240-page manual on the entire model with accompanying pamphlets about model components.

High/Scope First Chance Outreach Project

ADDRESS: 600 North River Street
Ypsilanti, Michigan 48197
PHONE: (313) 485-2000

FISCAL AGENCY: High/Scope Educational Research Foundation

DIRECTOR: Clay Shouse
COORDINATOR: Bettye McDonald
OTHER STAFF TITLES: education consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
High/Scope Educational Research Foundation

DESCRIPTION OF DEMONSTRATION MODEL:

The project is located in an integrated classroom where the Cognitively Oriented Preschool Curriculum has been shown to have a positive impact on nonhandicapped and handicapped children. The curriculum, based in Piaget's child development theory, presents a framework for supporting total development of the child.

MAJOR OUTREACH GOALS:

- To provide quality services to young handicapped and nonhandicapped children.
- To disseminate program information.
- To select five replication sites and offer technical assistance and training.
- To certify selected staff members at replication sites to conduct dissemination activities in their local areas.

MAJOR OUTREACH SERVICES:

The project conducts needs assessments, training visits and services, on-site consultations, demonstration classrooms, teacher and trainer institutes, project evaluations, and monitoring assistance to replication sites and to projects interested in replication. The project also disseminates the High/Scope Curriculum and provides awareness information through introductory workshops, mail, and telephone contacts.

FEATURES AND PRODUCTS:

The High/Scope Curriculum is documented in Young Children in Action: A Manual for Preschool Educators. Many audiovisual materials are available to support training in this model. Pre- and posttesting with the McCarthy Scales of Children's Abilities indicate that the children as a group advanced 2.02 months in mental age for each month in the program.

* 105 sites are reported to be using components of the project's demonstration model.

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Early Education Center Outreach Project

ADDRESS: P.O. Box 10356
Westland Station
Jackson, Mississippi 39209

PHONE: (601) 353-1664

FISCAL AGENCY: Christian Educational Services, Inc.

DIRECTOR: Sharon Booth
OTHER STAFF TITLES: outreach trainers, secretary/bookkeeper

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
State Department of Public Welfare, State Department of Education, and private and community donations

DESCRIPTION OF DEMONSTRATION MODEL:
The model program provides developmental training for handicapped children birth to age 6 years. A multidisciplinary team designs programs to meet each child's individual needs. Staff members use the "clipboard system" to record child progress. This system provides performance data in the areas of gross- and fine-motor, social, language, self-help, cognitive, and behavioral skills. Parents are encouraged to take an active part in planning and carrying out programs at home.

MAJOR OUTREACH GOALS:

- To stimulate replication and adaptation of the model.
- To provide technical assistance and training.
- To conduct workshops and seminars for professionals and paraprofessionals serving young handicapped children.
- To disseminate information and materials to increase public awareness.
- To develop materials related to serving preschool handicapped children.

MAJOR OUTREACH SERVICES:
The project has trained staff at 56 agencies and groups and has sponsored or participated in 24 major workshops statewide. It has also contributed to developing and updating the MESH Resource Directory, now in its third printing. The project also developed, field-tested, and is distributing the A.P.P.L.E., a task-analyzed assessment curriculum system for use with children of developmental ages birth through 8 years.

FEATURES AND PRODUCTS:
The project has developed materials in these areas: programming for individual needs, the EEC Clipboard System, augmentative communication, therapeutic feeding, children's developmental disabilities, programming from assessment instruments, the EEC model, and outreach training modules (pretests, posttests, curricula, handouts, overheads, videotapes, and slide presentations). The following materials are available: MESH Resource Directory (a comprehensive list of agencies serving young handicapped children in Mississippi); Feeding/Language Assessment (a checklist of feeding patterns and prelanguage skills); the A.P.P.L.E. (see above); and a Stress Management Packet designed specially for the classroom teacher.

* 18 sites are reported to be using components of the project's demonstration model.

Project RUN/Outreach

ADDRESS: P.O. Box 967
Oxford, Mississippi 38665

PHONE: (601) 234-1476

FISCAL AGENCY: North Mississippi Retardation Center

DIRECTOR: Lisa Romine
OTHER STAFF TITLES: speech pathologist, special education teacher, physical therapy aide, teacher aide, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

The North Mississippi Retardation Center through the Mississippi Department of Mental Health, Division of Mental Retardation

DESCRIPTION OF DEMONSTRATION MODEL:

Project RUN offers a diagnostic and therapeutic program for children who are functioning at a preschool developmental age level and who are severely and profoundly multihandicapped. The Project RUN Assessment/Curriculum is used for each child's treatment program. The system includes four areas of infant development (auditory discrimination, visual and fine-motor skills, communication, and gross-motor skills) within the birth-to-48-month age range. The program employs behavior modification principles of reinforcement and prompting cues for eliciting desired responses. One-to-one programming is used. The model seeks to prevent institutionalization or facilitate deinstitutionalization of young severely and profoundly multihandicapped children.

MAJOR OUTREACH GOALS:

- To stimulate high-quality service programs for preschool handicapped children and their families through an effective outreach and demonstration model.
- To effect increased interest in serving the young severely and profoundly handicapped through awareness and coordination activities.

MAJOR OUTREACH SERVICES:

Project RUN offers replication and model use assistance, awareness and coordination activities, and training to interested projects. In addition, the project develops and disseminates products and information.

FEATURES AND PRODUCTS:

A four-day workshop at the facility and four days of technical assistance at the agency site are provided to projects for replicating or using the RUN model. Assistance is offered through presentations and short-term workshops and dissemination of printed materials to a national audience. Products developed by the project include: A Parent Component: Involvement and Training, Therapeutic Feeding Manual, Learning is FUN: A Guide for Parents, Project RUN -- Bibliography of Resources for Serving the Handicapped, and the Project RUN Early Education Assessment Curriculum for the Severely/Profoundly Multiply Handicapped (available from the J.A. Preston Corporation). The project has also contributed to the development of the Early Education Center's (see page 108) MESH Resource Directory, a statewide directory of early services for the handicapped.

* 10 sites are reported to be using components of the project's demonstration model.

Big Sky Progressive Development Rural Outreach Project

ADDRESS: Montana University Affiliated Program
University of Montana
Missoula, Montana 59812

PHONE: (406) 243-5467

FISCAL AGENCY: University of Montana

DIRECTOR: Richard A. VandenPol

OTHER STAFF TITLES: outreach services and training services specialists, outreach training assistants, product development specialists

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Montana University Affiliated Program

DESCRIPTION OF DEMONSTRATION MODEL:

Intervention techniques are designed for most severely, multiply, and mildly handicapped children in rural areas. The project conducts individual assessments, plans programs, and delivers classroom and home services (individual formal instruction, language stimulation, parental participation, nonhandicapped peer modeling, parent-implemented training, home-school communication, classroom group activities, and kindergarten preparedness training). Staff members use the Bayley Scales of Infant Development, the Brigance Inventory of Early Development, pre- and posttests, the Peabody Picture Vocabulary Test, the Sequenced Inventory of Communication Development, and the Stanford-Binet Intelligence Scale to assess child progress and program effectiveness.

MAJOR OUTREACH GOALS:

- To increase services to young handicapped children and their families.
- To develop and evaluate the Progressive Development Rural Outreach Model.

MAJOR OUTREACH SERVICES:

To introduce the model, project staff members conduct workshops at potential adoption sites or invite staff members from the adoption site to visit the project. Adoption sites receive additional outreach services and are encouraged to adopt all model practices (though, they may replicate fundamental levels of each component).

FEATURES AND PRODUCTS:

The project has developed a data-based Model Adoption Profile (MAP) which assesses use of model practices by an adoption site (a "fidelity index" score can be derived). Products developed or planned concern a system for integrating training activities of parents and preschool staff: strategies to attract and use community volunteers: and a curriculum based on mainstreaming, least restrictiveness, and failure-free learning. Integration into regular classrooms and home-based parent training are accomplished through interagency agreements.

* 5 sites are reported to be using components of the project's demonstration model.

Albuquerque Integration Outreach Project

ADDRESS: 3501 Campus Blvd., NE
Albuquerque, New Mexico 87106

PHONE: (505) 266-8811
268-0213

FISCAL AGENCY: Albuquerque Special Preschool

DIRECTOR: Gail Chasey Beam
CO-COORDINATORS: Mary Fortess and Deborah McCue

OTHER STAFF TITLES: integration specialists, speech pathologist, product development specialist, parent counselor, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
New Mexico Health and Environment Department Developmental Disabilities Bureau, United Way of Greater Albuquerque, and the Albuquerque Special Preschool

DESCRIPTION OF DEMONSTRATION MODEL:
The project serves handicapped and nonhandicapped children age 2 to 5 years in integrated classrooms. Educators are cross-trained in the use of diagnostic and cognitive-developmental approaches. Assessments include the Learning Accomplishment Profile, the Westby Symbolic Play Scale, the Alpern-Boll, the Criteria Checklist (developed by the project), and various language and motor instruments.

MAJOR OUTREACH GOALS:

- To increase awareness of the advantages of educating young handicapped children with nonhandicapped peers.
- To develop and disseminate products which stimulate interest and help train in the concept of integrating handicapped and nonhandicapped preschoolers.
- To train professionals and stimulate high-quality programs for young handicapped children and their families in rural and urban New Mexico.
- To stimulate state involvement in quality programs for handicapped preschoolers.

MAJOR OUTREACH SERVICES:
The project conducts awareness activities, develops and disseminates products, provides consultation and technical assistance, trains professionals, and promotes adaptation of the project's model at other sites. The project is developing a supplement to the early childhood state plan on the subjects of least restrictive environment and mainstreaming.

FEATURES AND PRODUCTS:
This project has developed Making Integration Work--A Teacher's Perspective, a guide for integrating handicapped and nonhandicapped preschoolers. Criteria for Integrating/Mainstreaming Handicapped Children, a checklist of behaviors used with developmental assessments; and Handbook for Parents, a question-and-answer handbook that covers common concerns about the integration of young handicapped and nonhandicapped children (a Spanish edition and an edition for the Native American community will be available by September, 1984).

* 10 sites are reported to be using components of the project's demonstration model.

FEED

Facilitative Environments Encouraging Development

ADDRESS: Hunter College
Box 20, 695 Park Avenue
New York, New York 10021

PHONE: (212) 772-4741

FISCAL AGENCY: Local school districts

DIRECTOR: Nicholas Anastasiow
COORDINATOR: Lisa Simon

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agencies.

DESCRIPTION OF DEMONSTRATION MODEL:
Junior high students receive classroom instruction in the nature of normal and delayed development. They work with normal and handicapped children in preschool and health care facilities. Thirty-five objectives are aimed at improving the outcome of child rearing.

MAJOR OUTREACH GOALS:

- To establish new projects in New York City.

MAJOR OUTREACH SERVICES:
Staff members consult with other projects, develop programs, and locate practicum sites (hospitals, preschool handicapped centers, normal preschools, day care).

FEATURES AND PRODUCTS:
The curriculum is designed by objectives, and instructional materials (books, films, etc.) are keyed to objectives. Evaluation data indicate major change in attitudes toward handicapped children and health care facilities. Students report positive feelings about being helpful, and handicapped centers receive valuable service from students.

* 200 sites are reported to be using components of the project's demonstration model.

JDRP-approved

OUTREACH 113

Early Childhood Intervention Outreach

ADDRESS: Rosemary Kennedy Center
2850 North Jerusalem Road
Wantagh, New York 11793

PHONE: (516) 781-4044

FISCAL AGENCY: Board of Cooperative Educational Services of Nassau County

DIRECTOR: Maureen Metakes
COORDINATOR: Dorothy Goodman
OTHER STAFF TITLES: educational coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Federal, local, and state funding

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves handicapped children birth to age 3 years, their parents, and their extended families. Children enroll in either the home or home/school program. The home program consists of a weekly visit to the home by a parent trainer who focuses on interaction between the parent and child and trains the parent in intervention techniques relating to cognitive, language, speech, self-help, and motor areas. The home/school program provides weekly visits to the home and daily three-hour classes at a local public school.

MAJOR OUTREACH GOALS:

- To inform and educate parents, professionals, and service providers regarding the needs of handicapped infants, toddlers, and their families.
- To heighten awareness about the Early Childhood Intervention Outreach Project.
- To improve the quality and delivery of services to handicapped infants, toddlers, and their families.
- To communicate with agencies and professional groups who are concerned with handicapped infants, toddlers, and their families.
- To disseminate Early Childhood Intervention Outreach products nationally.

MAJOR OUTREACH SERVICES:

The project identifies and visits potential adoption sites, disseminates materials to the public and to professionals, and presents workshops (parent involvement; the Early Childhood Intervention Curriculum; identification, screening, and assessment of infants and toddlers; and use of the transdisciplinary team approach).

FEATURES AND PRODUCTS:

The project has developed THE BEST BEGINNING . . . An Early Childhood Intervention Curriculum for Young Handicapped Children, Parent Orientation Guide, Guide to Developing an Early Childhood Education Program, and In the Beginning/A Parent Handbook.

A Regional Program for Preschool Handicapped Children

ADDRESS:
Putnam/Northern Westchester BOCES
Projects Building
Yorktown Heights, New York 10598

PHONE: (914) 962-2377

FISCAL AGENCY: Putnam/Northern Westchester Board of Cooperative Educational Services

DIRECTOR: Carol S. Eagen
COORDINATOR: Marsha Bendavid
OTHER STAFF TITLES: secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

New York State Department of Education and the county of the child's residence (under Section 236 of the Family Court Act)

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves 125 children birth to age 5 years who demonstrate a broad range of handicaps and who reside within 18 component school districts. Child services combine home- and center-based approaches. Home training is based on the Portage Preschool Model. The classroom program uses diagnostic-prescriptive teaching, language intervention, and positive reinforcement. The McCarthy Scales of Children's Abilities, the Peabody Picture Vocabulary Test--Revised, and the California Preschool Social Competency Scales are administered pre and post.

MAJOR OUTREACH GOALS:

- To exchange information and materials with other projects and agencies.
- To develop, refine, and disseminate additional products related to adoption of the regional program.
- To provide technical assistance and training at 10 sites.
- To stimulate awareness for possible development of state mandates.
- To prepare trainers from designated demonstration sites to train target staff.

MAJOR OUTREACH SERVICES:

The project offers and evaluates awareness workshops, needs assessment for individual agencies, and specific training in model components (the Parent-Team Involvement Model and the Interactive Teaching Process).

FEATURES AND PRODUCTS:

The following materials are available from the project: The Curriculum Model for a Regional Demonstration Program for Preschool Handicapped Children, Preschool Project Manual, The Parent Volunteer System: A Manual and Activity Catalog for Teachers, Transdisciplinary Training, Assessment and Consultation Model, A Guide for Creating Community Awareness and Developing Interagency Cooperation, Parent Group Meetings -- Techniques and Topics, Transition Program -- Preparing for School, Long Range Effects of the Preschool Handicapped Program -- A Follow Up Study, and Summary of Program Accomplishments 1979-81.

* 50 sites are reported to be using components of the project's demonstration model.

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Chapel Hill Training-Outreach Project

ADDRESS: Lincoln Center
Merritt Mill Road
Chapel Hill, North Carolina 27514

PHONE: (919) 967-8295

FISCAL AGENCY: Chapel Hill-Carrboro Public Schools

DIRECTOR: Anne R. Sanford
OTHER STAFF TITLES: family involvement coordinator, special education trainers, secretaries, curriculum and behavior modification consultants

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Kentucky, Louisiana, Florida, and North Carolina state education agencies; Administration for Children, Youth and Families; Title I; North Carolina Mental Health Services; North Carolina Division of Day Care Services; and Chapel Hill-Carrboro (North Carolina) Public Schools

DESCRIPTION OF DEMONSTRATION MODEL:

The project uses the LAP and parental needs assessments to establish individual learning objectives. The model offers center-based, home-based, and mainstream settings. Teacher training in curriculum task analysis, behavior modification, parent involvement, and the assessment-curriculum design are basic model components.

MAJOR OUTREACH GOALS:

- To stimulate replication of the model through incentive grants from: Louisiana, Kentucky, Florida state education agencies; the North Carolina Division of Day Care Services; Region IV Head Start, and local North Carolina schools and mental health day-care programs.

MAJOR OUTREACH SERVICES:

The Kentucky State Department of Education has applied all its incentive grant funds to the replication of the Chapel Hill model in 153 counties; the Chapel Hill-Carrboro Schools and Region IV Head Start have established model replication sites; and 35 Louisiana parishes have replicated the model through statewide outreach involving the Louisiana incentive grant plan.

FEATURES AND PRODUCTS:

The United Arab Republic has translated and adapted the Chapel Hill model. The project provided two weeks of intensive training to personnel in Guam to replicate the model in public health and department of education programs. Materials have been translated into Korean and form the basis for preschool programs in that country. Project-developed materials include slide-tape programs, public service announcements, and manuals and other print materials on topics such as assessment, curriculum, family involvement, P.L. 94-142, and competency-based training. "New Friends," a training program designed to develop positive attitudes toward handicapped individuals, is a major component of the mainstreaming efforts. Contact the project for a comprehensive list of materials.

* 1,207 sites are reported to be using components of the project's demonstration model.

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Project TAP Outreach
Tapping Achievement Potential

ADDRESS: P.O. Box 19643
North Carolina Central University
Durham, North Carolina 27707

PHONE: (919) 683-6509

FISCAL AGENCY: North Carolina Central University

DIRECTOR: Barbara K. McCloud
OTHER STAFF TITLES: outreach trainers, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Private, nonprofit agency

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves 15 to 20 predominately minority children age 3 to 6 years who are high risk, mildly handicapped, or developmentally delayed. The curriculum is based on Thurstone's Primary Mental Abilities and is composed of acquisition and generalization stages. The Carolina Developmental Profile provides the basis for assessment of instruction and child progress. Children are served in a mainstreamed, day-care setting.

MAJOR OUTREACH GOALS:

- To increase public and professional awareness of day care as early intervention.
- To stimulate quality programs for the high-risk, mildly handicapped, or developmentally delayed child.
- To stimulate replication of the Project TAP model in day care in Durham, North Carolina, and in the southeastern region of the United States.
- To provide training to day-care teachers.
- To foster interagency cooperation.

MAJOR OUTREACH SERVICES:

The project provides in-service and pre-service training and technical assistance in the areas of assessment, curriculum, and program planning for day-care teachers.

FEATURES AND PRODUCTS:

A manual for replication is available from the project. Assessment and curriculum materials are available from Kaplan Corporation.

* 8 sites are reported to be using components of the project's demonstration model.

IS/PT

Infant Stimulation/Parent Training

ADDRESS: U.C. College of Medicine
Department of Pediatrics
231 Bethesda Avenue
Cincinnati, Ohio 45267

PHONE: (513) 872-5341

FISCAL AGENCY: University of Cincinnati

DIRECTOR: Earladeen Badger
COORDINATOR: Lisa Miles
OTHER STAFF TITLES: nurse, neonatal physician's assistant, special educator, secretary/data collector

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

University Hospital, Department of Pediatrics (Newborn Division), Children's Hospital Research Foundation

DESCRIPTION OF DEMONSTRATION MODEL:

IS/PT offers a hospital-based early education intervention program in infant stimulation and parent education and support. IS/PT also offers a program for high-risk parent-infant pairs during the infant's first three years of life.

MAJOR OUTREACH GOALS:

- To replicate the Infant/Toddler Learning Program with a variety of populations and diverse settings.
- To increase the number of hospital-based early intervention programs.
- To coordinate birth-to-three educational programs in Ohio through leadership of United Services for Effective Parenting (USEP).
- To demonstrate the importance of primary, secondary, and tertiary prevention programs during the first three years of life.
- To certify birth-to-three program delivery personnel in Ohio (instruction and practicum experience).

MAJOR OUTREACH SERVICES:

The project provides training for the replication of three educational models: Infant Stimulation/Mother Training (postnatal classes for teenage mothers and their infants), Nursing Protocol (infant stimulation and parent support in hospital nurseries), and Infant/Toddler Learning (monthly family seminars during the child's first three years of life).

FEATURES AND PRODUCTS:

Curricula include Mother-Infant Classes and Infant/Toddler: Introducing Your Child to the Joy of Learning. High-quality 3/4" videocassettes produced explore parent-infant interaction at various ages, baby massage, administration of the Mini-Brazelton, Infant/Toddler Learning Program monthly family seminars, and Nursing Protocol for Infant Stimulation in a Newborn Intensive Care Nursery.

* 74 sites are reported to be using components of the project's demonstration model.

Pediatric Education Project

ADDRESS:
The Nisonger Center
The Ohio State University
1580 Cannon Drive
Columbus, Ohio 43210

PHONE: (614) 422-8365

FISCAL AGENCY: The Ohio State University Research Foundation

DIRECTOR: Michael J. Guralnick
COORDINATOR: Karen Heiser
OTHER STAFF TITLES: assistant coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local hospital and university support

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides pediatric residents with a one-month rotation in the care and treatment of handicapped children. The residents' progress on a variety of clinical and objective instruments is assessed.

MAJOR OUTREACH GOALS:

- To establish replication in five major residency training programs across the country and promote a mandatory rotation in this topic area for all residents.

MAJOR OUTREACH SERVICES:

The project offers technical assistance, workshops, and supportive educational materials and participates in policy sessions and conferences on critical issues.

FEATURES AND PRODUCTS:

A comprehensive curriculum is available, including content outlines, clinical protocols, case studies, and evaluation instruments.

* 26 sites are reported to be using components of the project's demonstration model.

Teaching Research
Infant & Child Center Data-Based Classroom

ADDRESS: 345 North Monmouth Avenue
Todd Hall
Monmouth, Oregon 97361

PHONE: (503) 838-1220
ext. 391

FISCAL AGENCY: Oregon State System of Higher Education

DIRECTOR: Joyce M. Peters
COORDINATOR: Torry Piazza Templeman
OTHER STAFF TITLES: trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local and state funds

DESCRIPTION OF DEMONSTRATION MODEL:

The project is a classroom-based behavioral program serving children ages 2 to 8 years with a variety of handicaps including Down's syndrome, cerebral palsy, mental retardation, speech delay, and risk conditions. The program emphasizes individual instruction, trial-by-trial data collection, and the use of trained volunteer instructors. The Teaching Research Placement Test is the key assessment instrument used to place children into the Teaching Research Curriculum for Moderately and Serverely Handicapped. This curriculum is developmental and task analyzed in format.

MAJOR OUTREACH GOALS:

- To stimulate quality replications of the model's key components.

MAJOR OUTREACH SERVICES:

The project offers five days of training at the demonstration center at Teaching Research. Two follow-up, technical assistance visits are provided to each replication site. The project also provides awareness workshops.

FEATURES AND PRODUCTS:

The project offers practicum-based training in a Teaching Research demonstration classroom with supervision and feedback provided by project staff. Evaluation is provided on an ongoing basis to trainees at pre-training, during training, post-training, and at the time of follow-up. Project staff have authored the following publications: Training in the Teaching Research Data Based Classroom Model (available only in conjunction with training); The DATA Based Classroom for Moderately and Severely Handicapped; Teaching Research Curriculum (volumes include Language, Self-Help, Cognitive, Gross and Fine Motor). Project staff are available to provide both general awareness presentations and in-depth workshops on model components.

* 300 sites are reported to be using components of the project's demonstration model.

JDRP-approved

FCRP
Family Centered Resource Project

ADDRESS: Albright College
P.O. Box 516
Reading, Pennsylvania 19603

PHONE: (215) 921-2381
Ext. 236

FISCAL AGENCY: Pennsylvania Department of Education

DIRECTOR: Gilbert M. Foley
COORDINATOR: Barbara J. Keene
OTHER STAFF TITLES: pediatric consultant, physical therapist, occupational therapist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Berks County Intermediate Unit -- Preschool Special Needs Program

DESCRIPTION OF DEMONSTRATION MODEL:

The project serves multihandicapped infants and preschoolers in a family context, with emphasis on children with mental retardation and neuromotor dysfunction. The project's theoretical orientation integrates a developmental frame of reference with object relation analysis. Service delivery consists of three model components: the transdisciplinary approach, family development planning, and assessment and facilitation of attachment-separation-individuation.

MAJOR OUTREACH GOALS:

- To increase and enhance services to preschool handicapped children in Pennsylvania and the nation through awareness training and replication of the model.
- To train preschool personnel in the three components of the model.

MAJOR OUTREACH SERVICES:

The project provides needs assessments, replication training, follow-up site visits, individualized technical assistance, one-day awareness workshops, participatory conferences, keynote addresses, parent groups, and college courses.

FEATURES AND PRODUCTS:

The project uses a family oriented transdisciplinary approach to serve handicapped infants and preschoolers. Project staff members have expertise in transdisciplinary assessment and programming, family intervention (particularly as it relates to loss-grief reactions), and facilitating the process of attachment-separation-individuation in handicapped children. Products include: Medical Perspectives on Brain Damage and Development, the Attachment-Separation-Individuation Scale, Family Development Planning: A Process Manual, and the Cognitive Observation Guide. The project also disseminates awareness materials describing the three components of the model.

* 28 sites are reported to be using components of the project's demonstration model.

OUTREACH 121

Education for Severely Handicapped

ADDRESS: Box 64,
Foster, Rhode Island 02825
PHONE: (401) 728-3376

FISCAL AGENCY: Educational Technology Center, Inc.

DIRECTOR: Edmond S. Zuromski
COORDINATOR: Alice Babcock
OTHER STAFF TITLES: psychologist, special education teacher, engineer, adaptive equipment technician, physical therapist, speech therapist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local agencies and the state of Rhode Island

DESCRIPTION OF DEMONSTRATION MODEL:

The Active Stimulation Program, a technology-based educational model, develops curriculum and equipment (for severely/profoundly handicapped children) based on the use of response-contingent sensory stimulation. The project provides services at home, at school, and at a state institution. The project measures child progress by an N=1 design built into individual activities, a project-developed Behavioral Checklist, the Hoskins-Squires Test for Reflex and Gross Motor Development, and the Callier-Azusa Scale.

MAJOR OUTREACH GOALS:

- To provide training to teachers, therapists, and parents on the theory and technique of active stimulation (the combined use of adaptive devices and contingent sensory reinforcement to teach basic skills to severely/profoundly handicapped children).
- To provide training in the areas of behavioral management, handicaps of infancy and childhood, and the use of technology to teach the severely/profoundly handicapped.
- To stimulate replication sites for the Active Stimulation Program.
- To solve technological problems, especially those relevant to the severely/profoundly handicapped child.

MAJOR OUTREACH SERVICES:

The project conducts workshops on the theory and technique of the Active Stimulation Program, develops and evaluates programs for severely/profoundly handicapped children, and designs technological aids for learning and communication.

FEATURES AND PRODUCTS:

The curriculum and a manual on the Active Stimulation Program are available from the project. The project also provides consultations on educational technology.

* 70 sites are reported to be using components of the project's demonstration model.

OUTFIT Project

Outreach: Family, Infant, Toddler

ADDRESS: Box 151, Peabody College
Vanderbilt University
Nashville, Tennessee 37203

PHONE: (615) 322-8425

FISCAL AGENCY: John F. Kennedy Center for Research on Education and Human Development, Peabody College of Vanderbilt University

DIRECTOR: Bob Kibler
CO-COORDINATORS: Elizabeth Gerlock and Mary Porter
OTHER STAFF TITLES: principal investigator, program evaluator, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Title XX, DDSA, private donations, and local fund-raising activities

DESCRIPTION OF DEMONSTRATION MODEL:

The model was designed to serve rural middle Tennessee's mentally retarded and multihandicapped children birth to age 4 years. Activity programs focus on gross-motor, personal/social, hearing and speech, nonverbal communication, eye-hand coordination, and gestural and verbal imitation. Parents participate in training and support groups and weekly educational clinics. Training programs are also offered for extended family members and local allied professionals.

MAJOR OUTREACH GOALS:

- To increase awareness and provide information about a) the needs of young children with handicaps and their families, especially in rural areas; b) the FIT model of service delivery; c) OUTFIT Project services; and d) information about early intervention, child development, and handicapping conditions.
- To assist and train professionals to begin new early intervention services or improve existing services.
- To provide leadership and assistance for further development of the Tennessee Early Intervention Network for Children with Handicaps.
- To facilitate coordination of services among appropriately related projects.

MAJOR OUTREACH SERVICES:

The project offers information services (a slide show, training materials, reprints of articles, a newsletter, visits to the demonstration site, a lending library, a rural resource bank), technical assistance, and state networking services.

FEATURES AND PRODUCTS:

The project has developed the Parent Group Guide: Topics for Families of Young Handicapped Children, An Early Intervention Curriculum Matrix, the Family, Infant, and Toddler (FIT) Guide, and the FIT Training Guide. The Tennessee Early Intervention Network for Children with Handicaps (over 220 members) was developed as a direct result of efforts of the project and the Early Lifestyles Project at Columbia, Tennessee. The OUTFIT Project focuses heavily on state networking.

* 5 sites are reported to be using components of the project's demonstration model.

ADAPT Project

ADDRESS: AISD Developmental Center
910 East St. Johns Avenue
Austin, Texas 78752

PHONE: (512) 453-5651

FISCAL AGENCY: Austin Independent School District

DIRECTOR: Fred Tinnin
COORDINATOR: Allsion Ryan
OTHER STAFF TITLES: teacher/demonstrator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Austin Independent School District and state foundation funds

DESCRIPTION OF DEMONSTRATION MODEL:

ADAPT is a multifaceted, process-model curriculum for severely and profoundly multihandicapped children and offers a complete training and data collection system. The project features more than 900 objectives in six areas that have been task analyzed with generalization steps. The project conducts one- to two-day workshops with training media and provides follow-up visits.

MAJOR OUTREACH GOALS:

- To disseminate the ADAPT curriculum through training materials and media.
- To measure progress of severely/profoundly handicapped children birth to age 9 years using a performance evaluation.
- To revise and update curriculum material to meet the needs of the preschool multihandicapped population.
- To establish regional ADAPT coordinators who can provide training and technical assistance in their regions.

MAJOR OUTREACH SERVICES:

The project conducts one- to two-day workshops with media and demonstration and offers follow-up visits. The project produces brochures, journal articles, and abstracts.

FEATURES AND PRODUCTS:

ADAPT has consistently demonstrated significant improvement in rates of learning of students enrolled in the curriculum. ADAPT is easily adapted for different populations, such as deaf-blind or the orthopedically impaired. The ADAPT system is quickly learned by paraprofessionals or parents. It provides a framework in which ancillary services (occupational and physical therapy, speech, nursing, psychology, counseling) can work efficiently. Sixteen sites have implemented a formal replication of the ADAPT model. ADAPT's self-paced training modules (videocassettes) and its entire curriculum package are available.

* 189 sites are reported to be using components of the project's demonstration model.

Project KIDS

ADDRESS: Stephen J. Hay School
3801 Herschel
Dallas, Texas 75219

PHONE: (214) 526-0990

FISCAL AGENCY: Dallas Independent School District

DIRECTOR: Ruth Turner
COORDINATOR: Ruth Wilson
OTHER STAFF TITLES: evaluation specialists, parent involvement specialists

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Dallas Independent School District and state funds (ECI Grant--SB630)

DESCRIPTION OF DEMONSTRATION MODEL:

Project KIDS is a home-to-center transition model serving infants (birth to age 2 years) in the home, toddlers (2 to 3 years) in a center, and preschoolers (3 to 5 years) in early childhood public school classes. The project uses a developmental/prescriptive approach with strong parent involvement and evaluation components.

MAJOR OUTREACH GOALS:

- To replicate all Project KIDS program components in all early childhood sites in Dallas public school districts.
- To continue replication activities of selected program components in the regional outreach school districts currently being served.
- To replicate all or a portion of the program components in additional school districts in the area served by the educational service centers in Texas.
- To conduct demonstration and information-sharing activities to increase public awareness of the program model and of the importance of early intervention.
- To participate in the Triple T Consortium, a statewide organization for projects serving handicapped infants and toddlers.
- To disseminate Project KIDS appraisal, curriculum, staff development, evaluation, and parent involvement packages to other early childhood programs, public and private schools, and regional service centers to facilitate the development of quality programs.

MAJOR OUTREACH SERVICES:

Project KIDS distributes materials and trains personnel to use program components.

FEATURES AND PRODUCTS:

Materials available from the project include packets on parent involvement, program evaluation, appraisal, and staff development.

* 78 sites are reported to be using components of the project's demonstration model.

Project Transition Outreach Services

ADDRESS: 3309 Richmond Avenue
Houston, Texas 77098
PHONE: (713) 521-9584

FISCAL AGENCY: Mental Health Mental Retardation Authority of Harris County

DIRECTOR: Marlene Hollier
COORDINATOR: Mary McGonigel
OTHER STAFF TITLES: outreach trainers, secretary

SOURCE OF CONTINUTION FUNDING FOR SERVICE DELIVERY PROGRAM:
Mental Health Mental Retardation Authority of Harris County

DESCRIPTION OF DEMONSTRATION MODEL:

Project Transition provides local early childhood programs with transitional support services for parents and children leaving our community infant program to enter public schools. The transitional support services are combined with liaison services to the schools for the children and families.

MAJOR OUTREACH GOALS:

- To provide training and technical assistance to infant/preschool programs and public school early childhood programs which will enable them to provide parents with transitional support services and training.
- To provide replication sites with technical assistance and materials in the areas of program development and curriculum.

MAJOR OUTREACH SERVICES:

The project provides training and technical assistance in the areas of curriculum, program planning, and other services to children; parent training and other transitional support services; and liaison between public schools and infant/preschool programs.

FEATURES AND PRODUCTS:

The project developed and distributes a parent transition training notebook in Texas, Louisiana, and New Mexico editions; a 0-to-3 curriculum; and a 3-to-5 curriculum.

* 21 sites are reported to be using components of the project's demonstration model.

DEBT

Developmental Education Birth through Two

ADDRESS:	1628 19th Street Lubbock, Texas 79401	PHONE: (806) 747-2641 Ext. 455

FISCAL AGENCY: Lubbock Independent School District

COORDINATOR: Gloria Galey
OTHER STAFF TITLES: teacher trainers

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Local education agency

DESCRIPTION OF DEMONSTRATION MODEL:

The model serves children (birth to age 2 years) with a variety of handicaps. The project conducts medical evaluations and weekly home instructional programs and assists families with services offered by state and community agencies. The project offers a weekly play and water program, parent-study groups, child play groups, parent resource programs, follow-up services, and pre-service and in-service training. Assessment and screening processes include informal observation in the home; case history data; the Vineland Scale of Social Maturity; Denver; Koontz; REEL; and medical, physical, occupational, music, and speech therapy evaluations.

MAJOR OUTREACH GOALS:

- To train volunteers, paraprofessionals, and professionals in skills needed to implement home-based programs that provide comprehensive services for parents of very young handicapped children.
- To disseminate DEBT Project model information, service delivery systems, and training materials.
- To conduct research and disseminate results to state decision makers.

MAJOR OUTREACH SERVICES:

The project provides pre-service and in-service training for those in health, education, and social services and provides ongoing consultation to urban and rural replication sites. Staff members provide on-site training to pediatric residents at Texas Tech Health Science Center Medical School.

FEATURES AND PRODUCTS:

DEBT's research documenting child progress and parental involvement is available. Products include: DEBT Developmental Scale from Birth to Six Years, DEBT Teacher Activities Packet Birth to 36 Months, Comprehensive Training Notebook, DEBT GOSPEL (guidebook for program design), DEBT Model Project (brochure), Love Your Baby, and a bibliography of literature on child development and intervention. The project operates in a multicultural urban and rural community.

* 58 sites are reported to be using components of the project's demonstration model.

JDRP-approved

MAPPS
Multi-Agency Project for Preschoolers

ADDRESS: UMC 68
Utah State University
Logan, Utah 84322

PHONE: (801) 750-2019

FISCAL AGENCY: Exceptional Child Center, Utah State University

DIRECTOR: Glendon Casto
COORDINATOR: Adrienne Peterson
OTHER STAFF TITLES: physical therapist, nurse, dissemination coordinator

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Title XX

DESCRIPTION OF DEMONSTRATION MODEL:

The project is a home- and community-based intervention program serving handicapped children birth to age 5 years in rural and remote areas where there are few professionals trained to work with handicapped children. The program teaches parents of handicapped children birth to age 3 years to act as intervention agents for their children. For handicapped children age 3 to 5 years, the program provides curriculum materials and training to parents and teachers in existing preschools and community day-care programs.

MAJOR OUTREACH GOALS:

- To work with appropriate state agencies.
- To develop and disseminate products.
- To train rural service providers to improve the quality of services.
- To stimulate establishment of services in underserved areas.

MAJOR OUTREACH SERVICES:

The project provides curriculum materials and training for children birth to age 5 years in the areas of receptive and expressive language, self-help, motor, social-emotional, and pre-academic development. The project also provides technical assistance in program evaluation.

FEATURES AND PRODUCTS:

Project staff members administer standardized and criterion-referenced pre- and posttests, including the Bayley Scales of Infant Development, the Peabody Picture Vocabulary Test, the Assessment of Children's Language Comprehension, and the Visual Motor Integration Scale. Criterion measures developed by the project are also used. Results from these assessments show significant child gains over a nine-month period. The project has developed curriculum materials and criterion tests in six developmental areas (available from Walker Publishing Company, New York City). Project-developed materials have been used extensively with native American populations.

* 60 sites are reported to be using components of the project's demonstration model.

JDRP-approved

SKI*HI Outreach

ADDRESS: Department of Communicative Disorders
Utah State University UMC 10
Logan, Utah 84322

PHONE: (801) 753-4840

FISCAL AGENCY: Utah State University

DIRECTOR: Thomas C. Clark

OTHER STAFF TITLES: research and development director, training coordinator, technical assistance trainer/coordinator, information disseminator, evaluator, certified trainers, office manager

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

State of Utah legislative appropriation through the Utah School for the Deaf

DESCRIPTION OF DEMONSTRATION MODEL:

The project identifies and serves hearing-impaired children birth to age 6 years and their families through home visits. Services include teaching curriculum to parents; hearing aid management; and auditory, communicative, and language skills training. Observational checklists are used to assess parent and child; a language development scale measures child progress.

MAJOR OUTREACH GOALS:

- To help agencies provide high-quality home intervention services for underserved and unserved hearing-impaired preschoolers.

MAJOR OUTREACH SERVICES:

The project offers awareness activities, dissemination conferences, development of curricular materials, training, information dissemination, on-site technical assistance, and program evaluation through a nationwide data bank.

FEATURES AND PRODUCTS:

SKI*HI conducts a national summer conference as well as regional workshops for nearby replication sites that share similar training needs. The program has developed and made available a curriculum manual, a total communication curriculum, eight slide-tape programs, two flip-charts to help illustrate lessons to parents, a parent resource book, two language assessment instruments, two videotaped training packages, Spanish-language translations of several curricular components, a program for developing cognition in young hearing-impaired children, and a series of monographs on subjects relating to programming for young hearing-impaired children and their families. The project sends all replication sites a yearly summary of child and parent data. Analysis of language scale data for 1982-83 nationwide shows statistically significant gains in both expressive and receptive language.

* 131 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Hampton Institute Mainstreaming Model and Outreach Services

ADDRESS: Hampton Institute
Hampton, Virginia 23668

PHONE: (804) 727-5256

FISCAL AGENCY: Hampton Institute

CO-DIRECTORS: James B. Victor and Evelyn R. Albert
OTHER STAFF TITLES: outreach training specialists; secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Hampton Institute

DESCRIPTION OF DEMONSTRATION MODEL:

HIMM integrates significantly developmentally delayed preschoolers with nonhandicapped children. The Vulpe Assessment Battery provides the basis for the curriculum and the Performance Analysis System. Resource services are provided within each classroom to enhance social, cognitive, motor, self-help, and language skills. Parents may observe, attend parent groups and workshops, or receive home visits, according to individual needs and preferences. Appropriate services to children and families of diverse cultural backgrounds are emphasized.

MAJOR OUTREACH GOALS:

- To increase awareness of HIMM model components and HIMM outreach services.
- To assist target agencies in replication of appropriate HIMM components.
- To prepare and disseminate awareness, instructional, and training products.
- To increase understanding and support for early education of handicapped children who have been unserved or underserved.
- To maximize utilization of existing services by coordinating with local, regional, and national groups.

MAJOR OUTREACH SERVICES:

HIMM training specialists help sites assess needs and interests in relationship to HIMM components and provide appropriate training programs (workshops, classroom demonstration, on-site consultation, and resource materials). A complete training series, "Mainstreaming Young Handicapped Children," is available for credit from Hampton Institute's Continuing Education Program. HIMM staff members are actively involved in the Virginia Early Childhood Council, the Virginia Association of First Chance Projects, and in coordination efforts with local, regional, and state agencies.

FEATURES AND PRODUCTS:

Products include: training materials (Utilization of the Vulpe Assessment Battery/Performance Analysis Scale, Resources in the Classroom, Preparation for Mainstreaming) and awareness materials (print and audiovisual). A cultural diversity awareness checklist, a social interaction assessment instrument, and a videotape about resource teachers will be developed.

* 4 sites are reported to be using components of the project's demonstration model.

CDR Outreach
Child Development Resources

ADDRESS: P. O. Box 299
Lightfoot, Virginia 23090
PHONE: (804) 565-0303

FISCAL AGENCY: Williamsburg Area Child Development Resources, Inc.

DIRECTOR: Barbara Acree Kniest
COORDINATOR: Sharon E. Kiefer
OTHER STAFF TITLES: training and technical assistance consultant, secretary/bookkeeper

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Mental Health and Mental Retardation Community Services Board, United Way, private contributions, fees

DESCRIPTION OF DEMONSTRATION MODEL:

The rural-based project offers transdisciplinary programming for handicapped and developmentally disabled children birth to age 2 years. The parent is viewed as the primary teacher, so case managers conduct weekly home visits to help parents teach their children. Group parent meetings provide information about child development, management, and advocacy. The model is readily adaptable to a center-based setting. Program evaluation is based on parent satisfaction questionnaires, pre- and posttesting of infants on a standardized instrument, and the achievement of goals set during program planning. Child progress is assessed every four months.

MAJOR OUTREACH GOALS:

- To replicate components of the model and thereby increase quality services to handicapped and developmentally disabled infants birth to age 2 years and their families.
- To coordinate project activities with appropriate state agencies.
- To maintain and increase local awareness, support, and funding.

FEATURES AND PRODUCTS:

CDR plays a leadership role in the Virginia Association of First Chance Projects, the Association of Virginia Infant Programs, statewide committees involved in interagency program planning for young children, the Rural Network, and INTERACT. Materials available are: Skills Inventory for Parents, a system of measuring change in parental skills; Skills Inventory for Teachers, a system of evaluating skills of home-based teachers; Parent Group Curriculum, designed to meet information and skill development needs of parents of young handicapped children; and Teaching Activities for Parents, activities for teaching infants birth to age 2 years.

* 25 sites are reported to be using components of the program's demonstration model.

Model Preschool Outreach Project

ADDRESS: Experimental Education Unit
University of Washington, WJ-10
Seattle, Washington 98195

PHONE: (206) 543-4011

FISCAL AGENCY: University of Washington

DIRECTOR: Rebecca R. Fewell
COORDINATOR: Patricia Oelwein
OTHER STAFF TITLES: field trainer (communication model), field trainer (Down's syndrome model), dissemination specialist, program evaluator, secretary

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
The state of Washington, local education agencies, and public agencies

DESCRIPTION OF DEMONSTRATION MODEL:
The program for children with Down's syndrome and other developmental delays is designed to accelerate and maintain children's gains in fine- and gross-motor, self-help, social, communication, and cognitive areas. The communication program uses systematic instructional programming in communication and language to modify the deficiencies identified by assessment and by observation in the classroom. Children in the Down's syndrome program are assessed twice yearly with the DSPI. The communication program uses the SICD and the Preschool Profile.

MAJOR OUTREACH GOALS:

- To provide training and other assistance to programs.
- To prepare and provide materials to programs and individuals.
- To promote awareness and stimulate improved services.

MAJOR OUTREACH SERVICES:
The project offers field-based and center-based training, technical assistance, instructional and informational materials, and follow-up assistance as requested.

FEATURES AND PRODUCTS:
The program has demonstrated that it can effectively work with communication-delayed children and those with Down's syndrome and other developmental delays. Parent involvement techniques particulary maximize child gains as parents and other members of the interdisciplinary team coordinate efforts at home and at school.

* 50 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Northwest Center Infant/Toddler Program

ADDRESS: 1600 W. Armory Way
Seattle, Washington 98119

PHONE: (206) 285-9140

FISCAL AGENCY: Northwest Center for the Retarded

EXECUTIVE DIRECTOR: James McClurg
PROJECT DIRECTOR: Linda L. Gil
OTHER STAFF TITLES: occupational therapist, communications disorder specialist, RN, special education teacher, family specialist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Developmental Disabilities; private funding sources; tuition from parents of non-handicapped children; state, county, and local public revenues; Title I

DESCRIPTION OF DEMONSTRATION MODEL:

The center- and home-based program serves children birth to age 3 years and their families. Children may be multihandicapped or simply mildly delayed in one skill area. The center-based program is completely integrated (24 normally developing children and 24 handicapped children). The program includes educational programming, therapies, family involvement, health services, and a nutrition component. Child change is measured by the standardized and criteria-referenced developmental checklists.

MAJOR OUTREACH GOALS:

- To provide awareness and information about the program to other public and private programs serving handicapped children.
- To replicate components of the model.

MAJOR OUTREACH SERVICES:

The project conducts presentations to organizations, public schools, agencies, and others who request information. Project staff members provide direct training and evaluation assistance for programs replicating components of the model. Staff members also consult with community college personnel.

FEATURES AND PRODUCTS:

The project has developed the manual, The Integration of Handicapped and Nonhandicapped Infants and Toddlers: A Guide to Program Development; a series of ten tapes from the "Young and Special" tape series (to enhance the use of specific training components at replication sites); and a curriculum guide for use with disabled parents of at-risk and handicapped children.

* 2 sites are reported to be using components of the project's demonstration model.

The Portage Project

ADDRESS: 626 E. Slifer Street
P.O. Box 564
Portage, Wisconsin 53901

PHONE: (608) 742-8811

FISCAL AGENCY: Cooperative Educational Service Agency #12

DIRECTOR: George Jesien
FEDERAL PROJECTS DIRECTOR: Paul L. Gundlach
OTHER STAFF TITLES: training specialists, materials development specialist.

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

Twenty-three local school districts in south-central Wisconsin in cooperation with the Wisconsin Department of Public Instruction

DESCRIPTION OF DEMONSTRATION MODEL:

The Portage Project is a structured, data-based, individualized home teaching program serving multicategorical handicapped children birth to age 6 years. A home teacher helps parents assess their children's present skill level in five developmental areas, target emerging skills, define appropriate teaching techniques, and evaluate their children's performance. Learning occurs in the parent and child's natural environment, and one-to-one interaction promotes full family participation and individualization of instructional goals.

MAJOR OUTREACH GOALS:

- To provide training and technical assistance to agencies interested in implementing home-based services for preschool children with special needs.
- To advocate for and help support effective and satisfying direct involvement of parents in the education of their children.
- To develop and disseminate materials.
- To support the HCEEP goal of comprehensive services for all children with handicaps from birth to age 6 years.

MAJOR OUTREACH SERVICES:

Staff members provide training and technical assistance to replication and demonstration sites, conduct awareness workshops and conference presentations, and develop and disseminate materials to help replicate the model.

FEATURES AND PRODUCTS:

The project developed the Portage Guide to Early Education (English and Spanish), a curriculum assessment for handicapped children birth to age 6 years; the Portage Parent (training) Program; the booklet Get A Jump On Kindergarten; a newly revised comprehensive book on the Portage Model called The Portage Home Teaching Handbook; and training modules on topics such as "Transitioning the Special Needs Child," "Positive Discipline," and "Individualizing in the Classroom."

JDRP-approved

CP Project
for Infants and Young Cerebral Palsied Children

ADDRESS: 9001 West Watertown Plank Road
Wauwatosa, Wisconsin 53226

PHONE: (414) 259-1414

FISCAL AGENCY: Curative Rehabilitation Center

DIRECTOR: Rona Alexander
OTHER STAFF TITLES: assistant project director, technical program assistant, typist

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:
Federal and state funds, private organizations, insurance, and patient fees

DESCRIPTION OF DEMONSTRATION MODEL:

The project provides an array of services to children birth to age 3 years with neuromotor problems that result in feeding, speech, or language delays. The demonstration model conducted pre- and posttests with the Bzoch-League, REEL Scale, Mecham Verbal Language and Development Scale, and the Peabody Picture Vocabulary Test. The outreach program uses the Pre-Speech Assessment Scale.

MAJOR OUTREACH GOALS:

- To train staffs of replicating agencies (six-day Fundamental Guidelines Workshops).
- To train speech pathologist's in the Pre-Speech Assessment Scale.
- To present lectures and workshops on a national basis, emphasizing the need for early intervention and programming for infants and children with neuromotor involvement.
- To develop and revise materials in nutrition, pre-speech/feeding, and pre-linguistics/cognition.

MAJOR OUTREACH SERVICES:

The project trains teams of professionals from replicating agencies in six-day Fundamental Guidelines for Pre-Speech and Language Programming Workshops and trains speech pathologists in the Pre-Speech Assessment Scale. Project staff members visit all new replication sites. In addition, the project makes available new materials to new and previously trained sites in pre-speech/feeding, nutrition, and pre-linguistics/cognition.

FEATURES AND PRODUCTS:

The project's Pre-Speech Assessment Scale (1982 edition) is available as part of replication procedures.

* 71 sites are reported to be using components of the project's demonstration model.

JDRP-approved

Project WISP/Outreach
Wyoming Infant Stimulation Program

ADDRESS: P.O. Box 3224, University Station
Laramie, Wyoming 82071
PHONE: (307) 766-6145

FISCAL AGENCY: University of Wyoming

DIRECTOR: Janis A. Jelinek
COORDINATOR: Morita N. Flynn
OTHER STAFF TITLES: outreach trainer

SOURCE OF CONTINUATION FUNDING FOR SERVICE DELIVERY PROGRAM:

State of Wyoming, Department of Health and Social Services, State Department of Education (Title I), local government, United Way

DESCRIPTION OF DEMONSTRATION MODEL:

WISP provides comprehensive services for mildly to severely handicapped infants birth to age 3 years and their families. The program serves a rural area and uses both center- and home-based intervention. The model is developmental-prescriptive and includes these key components: identification and screening; assessment and diagnostics; program planning; curriculum for infants and toddlers; parent involvement; program evaluation; and administration and management. The major measure of child progress is the E-LAP; other criterion and norm-referenced measures are used as necessary.

MAJOR OUTREACH GOALS:

- To increase or improve services to handicapped preschoolers and their families.
- To create awareness of the need for early intervention.
- To develop and implement an effective outreach model.

MAJOR OUTREACH SERVICES:

The project provides on-site training and technical assistance to local programs that wish to replicate or adapt the model. Short-term training sessions are also conducted for parents, professionals, community groups, and university students. The project is currently developing and implementing a model for using the Agricultural Extension Services (Extension Home Economists) to increase awareness of and access to early intervention programs for segments of the agricultural community.

FEATURES AND PRODUCTS:

These materials were developed by or are available from the project: Infant and Toddler Resource Guide (a reference list of textbooks, assessment and screening instruments, curriculum materials, and audiovisual materials), the Parent-Child Summer Book, WISPParent Program Manual, the WISP Community Workshop Guide, the WISP Training Manual, a project brochure, the Wyoming Screening Manual, test materials for administration of the Revised Developmental Screening Inventory, and "Community Awareness of Early Intervention," (a hands-on public relations workshop).

* 17 sites are reported to be using components of the project's demonstration model.

Arizona

DIRECTOR:	Gene Gardner	PHONE: (602) 255-3183
COORDINATOR:	Sara Robertson	PHONE: (602) 255-3183
STATE DIRECTOR OF SPECIAL EDUCATION:	Diane Petersen	PHONE: (602) 255-3183

SIG ADDRESS:
Special Education
Arizona Department of Education
1535 West Jefferson
Phoenix, Arizona 85007

SPECIALNET USER NAME: ALANET

PERIOD OF FUNDING: 1982-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop a comprehensive plan for the delibery of coordinated services to handicapped children age 3 to 5 years.
- To develop a technical assistance network to address training and awareness for parents of preschool handicapped children.
- To develop and implement an efficacy study of the Title VI-B discretionary preschool projects and preschool incentive grant projects in Arizona through interagency efforts.
- To continue to promote development of systematic identification and referral procedures for handicapped preschool children through interagency planning at the state, regional, and local levels.
- To refine and finalize recommendations for certification and endorsement requirements for teachers of preschool handicapped children.

EVALUATION PLAN

Formative and summative evaluation activities focus on the progress of the project's staff members and others working toward SIG objectives. Data are also collected and analyzed to ascertain the summative results of accomplishing each objective. The evaluation will answer two questions: Did the project accomplish the activities as outlined by each objective? and, Did the accomplishment of objectives make a difference?

FEATURES AND PRODUCTS:

The Arizona SIG is assisted by an actively supportive and productive preschool advisory task force and consortium. Products of the joint effort include: Guidelines for Developing Services for Handicapped Preschool Children; Special Education Standards for Preschool Programs (not mandated); a "Preschool Appendix" to the state of Arizona monitoring handbook; a report assessing service capabilities and needs of existing preschool programs for handicapped children; a report assessing training and technical assistance needs of preschool special education programs; and a survey of agencies which provide identification, evaluation, and referral services for handicapped preschool children.

California

DIRECTOR:	Betsy Qualls	PHONE: (916) 323-6673
STATE DIRECTOR OF SPECIAL EDUCATION:	Louis S. Barber	PHONE: (916) 323-4768

SIG ADDRESS:
Office of Special Education
721 Capitol Mall
Sacramento, California 95814

SPECIALNET USER NAME: CALIFORNIAOSE

PERIOD OF FUNDING: 1978-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 years for those requiring "intensive special education and services."
Permissive: birth to age 3 years for those requiring "intensive special education and related services" (except in districts that offered a program in 1980-81).

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop a comprehensive statewide plan for the implementation of a coordinated full-service delivery system among all service providers.
- To develop comprehensive statewide interagency agreements for the implementation of a coordinated full-service delivery system among all service providers.
- To help develop a consortia of early childhood special educators.

EVALUATION PLAN:

The SIG advisory committee participates in an evaluation which will employ the "management by objectives" method. A survey is sent at the end of each year to all members of the advisory committee. Each SIG objective is rated for completion and effectiveness, information is summarized, and each objective is revised and updated by SIG staff members.

FEATURES AND PRODUCTS:

The California SIG has developed an intradepartmental plan to maximize use of all existing Department of Education service programs for young handicapped children. In addition, the SIG has established criteria for teacher accreditation and developed a needs assessment instrument for training and technical assistance. The SIG has developed two workshops: "Establishing Programs for Handicapped Preschool Children" and "Mainstreaming Young Handicapped Children." The print materials developed by the SIG include: Guidelines for Providing Services to Infant and Preschool Individuals with Exceptional Needs; Interstate Conference on Consortium Development; Selected Programs Serving Handicapped Infants and Preschool Children: A Compendium of Program Descriptions for California Educators; Early Warning Signs; a child-find brochure; Early Intervention: A Working Paper, providing baseline information on early intervention programs in California public school systems; and The Efficacy and Cost Effectiveness of Early Education for Handicpaped Infants and Preschool Children, a review of the literature.

Colorado

DIRECTOR: Brian A. McNulty PHONE: (303) 534-8871

COORDINATOR: Elizabeth W. Soper PHONE: (303) 534-8871

STATE DIRECTOR OF SPECIAL EDUCATION: Peter S. Fanning PHONE: (303) 534-8871

SIG ADDRESS:
Special Education Services
Colorado Department of Education
First Western Plaza, 6th floor
303 W. Colfax Avenue
Denver, Colorado 80204

SPECIALNET USER NAME: COLORADOSESU

PERIODS OF FUNDING: 1981-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 21 years.
Permissive: birth to age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- Revise comprehensive statewide plan for services to preschool handicapped.
- Implement and evaluate local interagency collaboration efforts.
- Collect and analyze program cost data.
- Conduct collaborative training activities.

EVALUATION PLAN:

Activities and products will be documented; all activities will be evaluated by target audiences; cost analysis data will be published; and local interagency process outcomes will be described and analyzed.

FEATURES AND PRODUCTS:

The project has developed revised (1983) early childhood special education teacher certification standards; Effectiveness of Early Special Education in Colorado; Perspectives on Interagency Collaboration (proceedings of a symposium, 1982); Early Childhood Special Education Guidelines; My Baby's Book/Libro de Mi Bebe (bilingual child development guide for parents); and the Child Find Manual.

Connecticut

DIRECTOR:	Virginia Volk	PHONE: (203) 566-5225
COORDINATOR:	Holden T. Waterman	PHONE: (203) 566-5358
STATE PROGRAM MANAGER OF EARLY CHILDHOOD SPECIAL EDUCATION:	William J. Gauthier, Jr.	PHONE: (203) 566-5079
STATE DIRECTOR OF SPECIAL EDUCATION:	Tom B. Gillung	PHONE: (203) 566-4383
SIG ADDRESS:	Room 350 State Department of Education P.O. Box 2219 Hartford, Connecticut 06145	
SPECIALNET USER NAME:	CONNECTICUTBSS	
PERIOD OF FUNDING:	1978-85	

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 (by January 1 of school year) to 21 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To continue the Interagency Early Intervention Committee of representatives from 11 agencies which serve young children with special needs.
- To develop a statewide comprehensive plan.
- To update and refine an information bank and retrieval system of statewide service agencies.
- To aid in the pilot implementation of the training and technical assistance provisions of the interagency agreement between Head Start and the Department of Education.
- To present one conference and three workshops to provide training and technical assistance in the area of early childhood special education.
- To develop guidelines for home-based and center-based programs for children birth to age 3 years.

EVALUATION PLAN:
On-site evaluation uses a matrix evaluation format.

Delaware

DIRECTOR: Carl M. Haltom PHONE: (302) 736-5471

COORDINATOR: Barbara E. Humphreys PHONE: (302) 736-4667

STATE DIRECTOR OF SPECIAL EDUCATION: Carl M. Haltom PHONE: (302) 736-5471

SIG ADDRESS:
State Department of Public Instruction
Townsend Building, P.O. Box 1402
Dover, Delaware 19903

SPECIALNET USER NAME: DELAWAREECD

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: from birth for deaf, blind, deaf/blind, and autistic; age 3 to 21 years for mentally retarded and orthopedically impaired; age 4 to 21 years for all other handicaps.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To help identify, verify, and define the need for a comprehensive plan.
- To determine issues and problems which require statewide planning.
- To secure administrative commitment to the comprehensive plan.
- To conduct a needs assessment process designed to identify quantitative and qualitative discrepancies among existing public and private early intervention programs in Delaware.
- To establish links with other states, state consortia, OSEP, TADS, NASDSE, Regional/Resource Centers and other interested agencies.

EVALUATION PLAN:

The three-phase planning model is an open system and the ongoing formative and yearly summative evaluations will provide periodic feedback to the planning group. An internal monitoring and evaluation team has been selected from the agencies' planning, research, evaluation, and infant/preschool staffs. The external, ongoing formative and yearly summative evaluations are conducted by a monitoring and evaluation team of in-state and out-of-state consultants. Out-of-state consultants are selected from the staffs of other state education agencies, Regional Resource Centers, TADS, and other sources.

FEATURES AND PRODUCTS:

Staffs of public and private agencies have developed a matrix to determine needs and gaps in service.

Florida

DIRECTOR. Landis Stetler PHONE: (904) 488-1570

COORDINATOR: Gloria Dixon Miller PHONE: (904) 488-2054

STATE DIRECTOR OF SPECIAL EDUCATION: Landis Stetler PHONE: (602) 255-3183

SIG ADDRESS:
Florida Department of Education
Knott Building
Tallahassee, Florida 32301

SPECIALNET USER NAME: FLORIDABEES

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: kindergarten to grade 12.
Permissive: birth to kindergarten.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop a draft of a comprehensive plan for maximizing services to preschool handicapped students.
- To provide one interagency pilot project to (1) demonstrate effective interagency planning and cooperation in the provision of quality services to preschool handicapped students and (2) to demonstrate the use of regional data to identify gaps in educational and related services to preschool handicapped students.

EVALUATION PLAN:

A third-party process evaluation will be conducted to help in developing the evaluation design, track project implementation and report findings and conclusions.

Georgia

DIRECTOR: Donna Coleman PHONE: (404) 656-6319

STATE DIRECTOR OF SPECIAL EDUCATION: Art Bilyeu PHONE: (404) 656-2425

SIG ADDRESS:
Programs for Exceptional Children
Georgia Department of Education
State Office Building
Atlanta, Georgia 30334

SPECIALNET USER NAME: GEORGIASPD

PERIOD OF FUNDING: 1983-1985

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 18 years.
Permissive: birth to age 4 years and age 18 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop, implement, and evaluate regional delivery models for eventual replication through subgrants to the local education agencies.
- To sponsor statewide training activities for professionals and paraprofessionals in assessment of prekindergarten handicapped children.

EVALUATION PLAN:

The advisory council will be responsible for evaluating the regional delivery models through on-site visits and periodic reports on goal completion. Training activities will be evaluated and presented in a summary report. Formative procedures will be used to evaluate print materials.

FEATURES AND PRODUCTS:

The following materials will be developed and disseminated: The Georgia State Plan for Services to Handicapped Preschoolers and A Resource Manual for Programs for Handicapped Preschoolers.

Hawaii

DIRECTOR:	Jo-Alyce K. Peterson	PHONE:	(808) 737-9859
COORDINATOR:	Kristine Renee Derer	PHONE:	(808) 737-2564
STATE DIRECTOR OF SPECIAL EDUCATION:	Miles S. Kawatachi	PHONE:	(808) 737-3720

SIG ADDRESS:
3430 Leahi Avenue
Honolulu, Hawaii 96815

SPECIALNET USER NAME: HAWAIISNB

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 20 years.
Permissive: birth to age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop curriculum and procedures that will prepare handicapped preschool children for subsequent (higher functioning) environments.
- To develop a skill assessment instrument, curriculum, and adaptations to address identified skills and procedures for facilitating acceptance, transition, and communication.

EVALUATION PLAN:

During the first year, ongoing formative evaluation will ensure timely completion of program elements (e.g., assessment instrument, observation, protocol, and curriculum). Summative evaluation strategies employed during the second year of SIG funding will include pre and post measures on skill attainment, rates of referral to regular kindergarten placements, and positive changes in attitudes of regular education teachers and peers.

Iowa

DIRECTOR: Frank Vance PHONE: (515) 281-3176

COORDINATOR: Nina Curran PHONE: (515) 281-3176

STATE DIRECTOR OF SPECIAL EDUCATION: Frank Vance PHONE: (515) 281-3176

SIG ADDRESS:
Department of Public Instruction
Grimes State Office Building
Des Moines, Iowa 50319

SPECIALNET USER NAME: IOWASEA

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth through age 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To improve communication and resource sharing among the early childhood special education consultants, coordinators, and specialists who are employed by the state education agencies.

EVALUATION PLAN:

The evaluation will have four main components:

- cataloguing of correspondence regarding activities;
- ongoing objective feedback questionnaires;
- outcome products;
- outside evaluation.

Kansas

DIRECTOR: Lucille Y. Paden PHONE: (913) 296-3866

COORDINATOR: Suzanne M. Grant PHONE: (913) 296-3866

STATE DIRECTOR OF SPECIAL EDUCATION: James E. Marshall PHONE: (913) 296-3866

SIG ADDRESS:
Special Education Administration
120 East 10th Street
Topeka, Kansas 66612

SPECIALNET USER NAME: KANSASSE

PERIOD OF FUNDING: 1978-82, 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 21 years.
Permissive: birth to age 5 years (all categories of handicaps).

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To expand educational services for young handicapped children in presently unserved or underserved areas of the state by facilitating multiagency services, providing technical assistance to local planning and development teams, and promoting public awareness.
- To acheive a high degree of excellence in programs developing or adopting exemplary curricula, facilitating identification and parent participation services, coordinating outreach activities, and conducting in-service workshops.
- To develop and implement a statewide program evaluation plan which addresses child change, parental participation and satisfaction, and cost effectiveness.

EVALUATION PLAN:

An Objective Evaluation Management Chart lists activities, their criteria and documentation, and expected completion dates. This chart will indicate if objectives are met. Effectiveness of the project will be judged by changes in the level of services (geographically and numerically), by the results of the program evaluation, and any changes in legislation or state-level recognition of the value of early developmental intervention.

FEATURES AND PRODUCTS:

The SIG produced the brochures Things that Count--As Children Grow and Develop (English and Spanish versions) and Puzzled About Handicapped Preschoolers?; slide tapes about the needs of young handicapped children and interagency planning; a listing of instruments suitable for preschool screening, evaluation, and assessment; the paper, "State Plan for Special Education (revised annually) Early Childhood Handicapped section"; the paper, "Teacher Certification and Endorsement for Early Childhood Handicapped"; and the Planning Handbook for Early Education of the Handicapped in Kansas (revised annually).

Louisiana

DIRECTOR:	Irene Newby	PHONE:	(504) 342-3631
COORDINATOR:	Daphne Thomas	PHONE:	(504) 342-1641
STATE DIRECTOR OF SPECIAL EDUCATION:	Irene Newby	PHONE:	(504) 342-3631

SIG ADDRESS:
Joint Project for Parent and Children Services
1272 Laurel Street
Baton Rouge, Louisiana 70802

SPECIALNET USER NAME: LOUISIANASE

PERIOD OF FUNDING: 1978-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 5 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To replicate and disseminate a detailed multiagency planning program for identification, evaluation, and program services for preschool handicapped children birth to age 5 years.
- To implement interagency agreements already established between the Louisiana State Department of Education and Head Start, the Office of Health Services and Environmental Quality, and the Office of Mental Retardation.
- To produce a dissemination packet for replication of the interagency model.

EVALUATION PLAN:

The Louisiana State Department of Education has contracted Dean Andrews and Associates to conduct a third-party evaluation that will measure the outcomes and impact of the interagency activities developed by the SIG.

FEATURES AND PRODUCTS:

Products developed by the SIG include: A Replication Guide for Collaborative Service Delivery Utilizing Health and Educational Services; interagency agreements between the Louisiana Office of Health Services, Head Start, and the state education agency; and Suggestions for Temporary Care for Illnesses and Emergencies.

Maine

DIRECTOR: Debbie Tuck PHONE: (207) 289-3451

STATE DIRECTOR OF SPECIAL EDUCATION: David N. Stockford PHONE: (207) 289-3451

SIG ADDRESS:
Division of Special Education
MDECS, SHS #23
Augusta, Maine 04333

SPECIALNET USER NAME: MAINESE

PERIOD OF FUNDING: 1978-81, 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 20 years (birthdate on or before October 15).
Permissive: age 3 to 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To design and conduct an efficacy study of the coordinated delivery system which has been established for serving 3- to 5-year-old handicapped children.
- To develop interagency program standards for services to handicapped children below school age.
- To develop a plan with the University of Maine and the University of New England to recruit and retain support service personnel (speech therapists, occupational therapists, physical therapists).
- To develop and begin implementation of a state plan to identify and refer handicapped and at-risk children birth to age 3 years.

EVALUATION PLAN:

All four objectives listed above will be evaluated by questionnaires, personal interviews with process participants, and record reviews. Evaluation issues will include product, process, quality, and efficiency concerns.

FEATURES AND PRODUCTS:

The SIG plans to develop products concerning the efficacy study; interagency program standards; the recruitment and retention plan; and the birth-to-3 identification and referral plan.

Maryland

DIRECTOR: Lin Leslie PHONE: (301) 659-2542

COORDINATORS: Janeen Taylor and Nancy Vorobey PHONE: (301) 659-2542

STATE DIRECTOR OF SPECIAL EDUCATION: Martha Irvin PHONE: (301) 659-2489

SIG ADDRESS:
Division of Special Education
200 West Baltimore Street
Baltimore, Maryland 21201

SPECIALNET USER NAME: MARYLANDDSE

PERIOD OF FUNDING: 1980-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 20 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To pilot Maryland's statewide plan for assuring quality educational services to young handicapped children and their families.
- To collect efficacy data to determine the impact of early intervention on handicapped young children and their families.
- To pursue interagency collaborative activities.
- To provide limited technical assistance to local public schools.
- To conduct a comprehensive evaluation of the impact of implementing the state plan.

EVALUATION PLAN:

The evaluation will be primarily summative in nature. Data will be collected before and after piloting the state plan each year. The information gathered will include the status of services with respect to local compliance, quality procedures, and collaboration with other local service providers. The methods for obtaining information will include structured interviews, record reviews, and observations. Parents, teachers, therapists, and administrators will participate in the evaluation.

FEATURES AND PRODUCTS:

The thrust of this project is twofold. First, the existing draft of Maryland's statewide plan for young handicapped children will be implemented in a sample of local school systems. This approach will ensure the application of the statewide plan throughout Maryland. Second, the project will continue to pursue state-level interagency coordination in order to improve services for young handicapped chidren and their families. Limited technical assistance will be provided to local school systems, and a multistate network will be developed to disseminate early childhood special education information.

Montana

DIRECTOR: Michael Hagen PHONE: (406) 657-2312

STATE DIRECTOR OF SPECIAL EDUCATION: Gail Gray PHONE: (406) 444-3693

SIG ADDRESS:
Montana Center for Handicapped Children
Eastern Montana College
Billings, Montana 59101-0298

SPECIALNET USER NAME: MONTANASS

PERIOD OF FUNDING: 1980-82, 1983-85.

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Permissive: preschool children.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To improve and enhance educational services to young handicapped children.
- To refine and disseminate products from past SIG.
- To provide technical assistance to school districts serving and planning to serve young handicapped children.
- To provide pre-service and in-service training.
- To disseminate information throughout the state.

EVALUATION PLAN:

Evaluation of the SIG will be conducted on a discrepancy evaluation basis. Management charts specify task, time lines, and persons responsible. The SIG director will evaluate progress based on completion of objectives as specified. Consumers and special education staff will also be surveyed for a consumer satisfaction rating.

New Hampshire

DIRECTOR:	Barbara Bourgoine	PHONE:	(603) 271-3741
STATE DIRECTOR OF SPECIAL EDUCATION:	Robert T. Kennedy	PHONE:	(603) 271-3741

SIG ADDRESS:

New Hampshire Department of Education
Special Education Section
105 Loudon Road
Concord, New Hampshire 03301

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop comprehensive guidelines which will help local education agencies and other public and private agencies identify newborn to 6-year-old educationally handicapped children and provide special education to 3- to 6-year-old handicapped children.
- To provide consultation, training, and technical assistance to local education agencies and public and private preschools serving handicapped children.
- To promote networking of programs, sharing of resources, and local interagency collaborations among programs for handicapped preschoolers.

EVALUATION PLAN:

Evaluation data will include surveys of members of the early childhood special education advisory committee and task force and personnel from local education agencies and private agencies. An independent evaluator will be contracted during the second year of the SIG to conduct an external evaluation of all SIG activities.

FEATURES AND PRODUCTS:

The New Hampshire SIG supports a statewide early childhood special education advisory committee which is developing guidelines for identifying and providing special education for preschool handicapped children. The SIG also supports an early childhood special education task force which will review existing monographs and topical papers and publish new ones for dissemination in the field. Teacher certification endorsements in the areas of early childhood and special education are also being developed.

New Jersey

DIRECTOR: Jane Hochman PHONE: (609) 984-5994

COORDINATOR: Andrea Quigley PHONE: (609) 292-0147

STATE DIRECTOR OF SPECIAL EDUCATION: Jeffrey Osowski PHONE: (609) 292-0147

SIG ADDRESS:
New Jersey Department of Education
CN 500
Trenton, New Jersey 08025

SPECIALNET USER NAME: NEWJERSEYSE

PERIODS OF FUNDING: 1978-79, 1981-1985

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop and implement a systematic plan to train administrators to use early intervention programs which will become available for dissemination to other states when proven to be effective.
- To establish an advisory committee.
- To implement a networking plan with other state education agencies, early childhood programs and early intervention program consortia.
- To continue and expand interagency collaborative efforts.

EVALUATION PLAN:

Formative and summative evaluation procedures will be used to monitor attainment of objectives within projected time lines and to evaluate quality and appropriateness of the training program and materials being developed.

FEATURES AND PRODUCTS:

Training materials or modules will be developed to address administrative and supervisory responsibilities of administrators of infant programs.

New York

DIRECTOR: Lawrence Gloeckler PHONE: (518) 474-5548

COORDINATOR: Michael Plotzker PHONE: (518) 474-8917

ASSISTANT COMMISSIONER OF SPECIAL EDUCATION: Lawrence Gloeckler PHONE: (518) 474-5548

SIG ADDRESS:
New York State Education Department
Office for Education of Children
with Handicapping Conditions
Division of Program Development
Room 1069 EBA
Albany, New York 12234

PERIOD OF FUNDING: 1977-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: age 5 to 21 years.

Permissive: Parents may petition through the Family Court in their county of residence for special education services for handicapped children below age 5 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To implement and expand a comprehensive state plan in the area of early childhood special education in order to increase the number of preschool handicapped children receiving quality special education services.
- To accelerate services to handicapped infants through interagency agreements.

EVALUATION PLAN:

The management by objective format of the proposal allows the department to clearly determine if objectives are achieved. A formal evaluation design to determine the effects of linking direction centers (designed to help parents and professionals secure services for handicapped children below age 5 years) and perinatal centers. Bimonthly reports will be reviewed and analyzed.

FEATURES AND PRODUCTS:

Past SIG efforts have established links between direction centers and regional perinatal centers. Current agreements with the perinatal centers allow handicapped children identified at birth to be matched to services as soon as a problem is identified. The SIG produced Special Education for Handicapped Children Birth to Five, a guidebook that describes special education programs for handicapped children in New York. SIG and Incentive Grant staff members produced Identification and Referral of Young Handicapped Children: The Physicians' Role, designed to help pediatricians and family practice physicians identify young handicapped children. How I Grow Birth Through Five guides parents through their children's major developmental milestones.

North Carolina

DIRECTOR:	Janis D. Britt	PHONE:	(919) 733-6081
STATE DIRECTOR OF SPECIAL EDUCATION:	Theodore R. Drain	PHONE:	(919) 733-3921

SIG ADDRESS:
Division for Exceptional Children
State Department of Public Instruction
Education Building, Room 451
Raleigh, North Carolina 27611

SPECIALNET USER NAME: NORTHCAROLINASE

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 17 years.
Permissive: birth to age 5 years; age 18 to 21 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To work cooperatively with other agencies to complete a full-service plan to serve young handicapped children.
- To develop procedures for implementing the plan and establish standards for program and service components.
- To develop and provide information and training programs for state and local personnel who will implement the plan.
- To fund pilot projects in selected local school units to field test the plan, to use and develop technological aids to plan efficient services, and to serve as models for serving preschool handicapped population.

EVALUATION PLAN:

The successful completion of objectives will be determined by the development of specific products (a completed plan, procedures, standards, and training packages). A process approach will be applied to the evaluation of each objective.

FEATURES AND PRODUCTS:

The SIG plans to use teleconferencing to train personnel to implement the full-service plan.

North Dakota

DIRECTOR:	Shelby J. Niebergall	PHONE: (704) 224-2277
COORDINATOR:	Brenda Oas	PHONE: (704) 224-2277
STATE DIRECTOR OF SPECIAL EDUCATION:	Gary Gronberg	PHONE: (704) 224-2277

SIG ADDRESS:
Department of Public Instruction
Division of Special Education
State Capitol
Bismarck, North Dakota 58505-0164

SPECIALNET USER NAME: NDAKOTADSE

PERIOD OF FUNDING: 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 5 years.
Permissive: birth to age 2 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To clarify interagency responsibilities and establish a continuum of services.
- To develop early childhood education programs where services are not now provided.
- To provide technical assistance to panels, staff, and administrators.
- To develop and disseminate appropriate curriculum guides and resource materials.
- To assess statewide in-service priorities and provide in-service activities.
- To collaborate with an advisory board of parents and representatives of agencies and organizations for provision of statewide full services.

EVALUATION PLAN:
A third-party evaluator will be used.

FEATURES AND PRODUCTS:
The SIG produced a brochure on interagency collaboration and curriculum guides and resource materials for serving children birth to age 5 years.

South Dakota

DIRECTOR:	Amy Homberg	PHONE: (605) 773-3678
STATE DIRECTOR OF SPECIAL EDUCATION:	George Levin	PHONE: (605) 773-3678

SIG ADDRESS:
Section for Special Education
Richard F. Kneip Building
700 North Illinois
Pierre, South Dakota 57501

SPECIALNET USER NAME: SDAKOTASSE

PERIOD OF FUNDING: 1978-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:

Mandated: birth to 21 years for children in need of prolonged assistance;
3 to 21 years for children in need of special assistance;
grades 1 through 12 for gifted children.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To formulate a statewide plan for a local education agency or cooperative to use to coordinate local public and private agencies.
- To coordinate SIG and preschool incentive grant activities to field test the statewide plan for interagency coordination.
- To revise existing interagency agreements and strategies for cooperation.

EVALUATION PLAN:

The SIG will conduct a process evaluation.

FEATURES AND PRODUCTS:

The SIG will conduct a pilot program using an interagency plan that contracts South Dakota's Association for the Education of Young Children to use its affiliates as a statewide early childhood network for technical assistance to local education agencies, other local agencies, and parents.

Tennessee

DIRECTOR:	Bette Berry	PHONE: (615) 741-2851
COORDINATOR:	Pam Frakes	PHONE: (615) 741-5274
STATE DIRECTOR OF SPECIAL EDUCATION:	JoLeta Reynolds	PHONE: (615) 741-2851

SIG ADDRESS:
Tennessee Children's Services Commission
Attn: Pam Frakes, Preschool Services Coordinator
Suite 1600 James K. Polk State Office Building
505 Deaderick Street
Nashville, Tennessee 37219

SPECIALNET USER NAME: TENNESSEESE

PERIODS OF FUNDING: 1979-80, 1982-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 4 to 21 years (from 3 years if deaf).

MAJOR SIG OBJECTIVES AND PURPOSES FOR 1983-1985:

- To analyze the discrepancies between the desired comprehensive service delivery agreed upon in 1982-83 and existing practices.
- To develop strategies to alleviate those discrepancies through plans of shared state resources.
- To use long-range interagency planning to implement those strategies.

EVALUATION PLANS:

The evaluation will measure: 1) the extent to which goals and objectives were accomplished; 2) how well the statewide Preschool Services Planning Committee functioned; 3) quality and usefulness of the directory listings and mapping of existing services, the plan, and other materials to be developed; and 4) how these products were received and what happened as a result.

FEATURES AND PRODUCTS:

Under the direction of the Tennessee Department of Education, Division of Special Programs, SIG activities are being conducted by the Tennessee Children's Services Commission, an independent state commission whose staff advocates for children, coordinates services for children, and provides information and technical assistance to the five state departments administering services to children. The SIG produced a directory of programs for preschool handicapped children and infants and has available for dissemination the "Evaluability Assessment of Selected Early Childhood Intervention Projects in Tennessee," a final report of a study conducted for the state by the Program Evaluation Laboratory of Vanderbilt University to determine the extent to which the various existing programs are structured to allow an evaluation of their effectiveness.

Washington

DIRECTOR: Joan Gaetz PHONE: (206) 753-0317

COORDINATOR: Joan Gaetz PHONE: (206) 753-0317

STATE DIRECTOR OF SPECIAL EDUCATION: Greg Kirsch PHONE: (206) 753-6733

SIG ADDRESS: Old Capitol Building
Olympia, Washington 98504

SPECIALNET USER NAME: WASHINGTONDSS

PERIOD OF FUNDING: 1978-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 years.
Permissive: birth to age 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To complete a statewide implementation of the state plan for coordinating early intervention services.
- To promote local interagency activities.
- To collect cost and efficacy data.

EVALUATION PLAN:

The state plan for coordinating early intervention services will be evaluated through three methods: 1) an independent evaluation of form and content by a consultant, 2) a field test site evaluation of form and content, and 3) feedback from sites that implement the plan.

FEATURES AND PRODUCTS:

The SIG program develops materials, provides technical assistance, establishes interagency planning groups, provides support to local parent advisory councils and other groups as they establish and maintain preschool programs, and uses a data base which documents the benefits and costs of early intervention.

West Virginia

DIRECTOR: Joseph C. Basile, II PHONE: (304) 348-8830

COORDINATOR: Marjorie D. Sisk PHONE: (304) 348-7805

STATE DIRECTOR OF SPECIAL EDUCATION: William Capehart PHONE: (304) 348-8830

SIG ADDRESS:
West Virginia Department of Education
Capitol Complex
Building 6, Room B-309
Charleston, West Virginia 25305

SPECIALNET USER NAME: WVOPRD

PERIOD OF FUNDING: 1979-81, 1983-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 5 to 23 years.
Permissive: age 3 to 4 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To develop a comprehensive state plan for preschool handicapped children birth to age 6 years.
- To document the efficacy of the established early childhood interagency task force and to establish two local interagency sites per year.
- To develop draft guidelines for local education agencies (emphasizing programs for children age 3 to 5 years).
- To develop a plan to provide appropriate training for direct service personnel (ultimately leading to full certification status).

EVALUATION PLAN:

The SIG will evaluate the services report that will be used as a data base for the state plan, evaluate instruments in their final form, draft guidelines, and the training plan to be submitted to the State Board of Education and State Board of Regents.

FEATURES AND PRODUCTS:

The SIG has developed preschool handicapped certification standards and the publication, Developing a Community Interagency Team.

Wisconsin

DIRECTOR:	Betty J. Rowe	PHONE:	(608) 266-6981
COORDINATORS:	Jenny Lange Jim McCoy	PHONE:	(608) 267-9172
STATE DIRECTOR OF SPECIAL EDUCATION:	Victor J. Contrucci	PHONE:	(608) 266-1649

SIG ADDRESS:
Wisconsin Department of Public Instruction
Division for Handicapped Children & Pupil Services
125 S. Webster Street, P.O. Box 7841
Madison, Wisconsin 53707

SPECIALNET USER NAME: WISCONSINDHC

PERIOD OF FUNDING: 1978-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: age 3 to 5 years.
Permissive: under age 3 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1985:

- To study the impact of programs for handicapped preschoolers in Wisconsin from 1976 to 1983.
- To disseminate the results of the study.
- To develop guidelines and suggested best practices for programs serving handicapped children birth to age 2 years.
- To produce and disseminate two booklets to encourage parents to become involved in the education of their young handicapped children.

EVALUATION PLAN:

The SIG will evaluate the efficacy study mentioned above by internal review and by an outside evaluator. The guidelines and suggested best practices will be evaluated by the SIG's advisory committee, by internal review, and by field test. The two booklets will be evaluated by examination of feedback from parents and teachers and by actual changes in parental involvement.

Wyoming

CO-DIRECTORS: Janis A. Jelinek PHONE: (307) 766-6145
Joseph Reed 777-6391

COORDINATOR: Patricia E. Spencer PHONE: (307) 766-5103

STATE DIRECTOR
OF SPECIAL EDUCATION: Gayle Lain PHONE: (307) 777-7417

SIG ADDRESS:
P.O. Box 3413
University Station
Laramie, WY 82071

PERIOD OF FUNDING: 1981-85

STATE LEGISLATION FOR SPECIAL EDUCATION SERVICES:
Mandated: birth to age 21 years.
Permissive: age 6 years.

MAJOR OBJECTIVES AND PURPOSES FOR 1983-1984:

- To complete the service delivery system plan.
- To pilot the service delivery system at a developmental center.
- To monitor the effectiveness of the service delivery system during pilot implementation, and modify as necessary.

EVALUATION PLAN:

Internal evaluation will be based on attainment of specified objectives; external evaluation will be conducted by a third-party evaluator.

CIREEH

Carolina Institute for Research On Early Education for the Handicapped

ADDRESS: 300 NCNB Plaza
Chapel Hill, North Carolina 27514
PHONE: (919) 962-2001

FISCAL AGENCY: Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill

PRINCIPAL INVESTIGATOR: James J. Gallagher
COORDINATOR: Jean W. Gowen

MAJOR OBJECTIVES:

- To conduct three coordinated five-year research projects that focus on the families of young moderately and severely handicapped children birth to age 5 years.
- To develop intervention materials to be used by parents and professionals.
- To disseminate materials, results from the research projects, and other institute papers on families of handicapped children.
- To train graduate students to conduct research in this area.
- To conduct a self-evaluation.
- To coordinate activities of this institute with those of the other two early childhood research institutes.

MAJOR ACTIVITIES:

The Fathers Present/Fathers Absent Project examines the father's role in families with handicapped children by analyzing paternal involvement in two-parent families. It also looks at the effects of alternative sources of support in one-parent families of handicapped children. The study has four objectives: 1) to assess the effects of the father's support in two-parent families on the mother's well-being and the child's development; 2) to measure the extent to which the mother's success in rearing a handicapped child in a single-parent home is enhanced by formal and informal support; 3) to assess the generalizability of the initial findings; and 4) to use the results of these two projects to develop training materials which service providers can use to strengthen support in two-parent and single-parent families.

The facilitating Parent-Child Reciprocity Project is investigating longitudinally the effectiveness of an intervention program designed to sensitize parents to the unique interactive capabilities of their handicapped infants. It is expected that these parents will feel more positively about their infants, will establish more synchronous interaction patterns with them, will promote more advanced levels of play, and will undergo less of the withdrawal and psychological stress experienced by parents without such training. The objectives of the project are: 1) to assess both the short- and long-term effects of the intervention; 2) to provide descriptive data on interaction of mothers and their handicapped infants and on the play behavior of handicapped infants; and 3) to produce intervention materials to be used by professionals working with parents of handicapped infants.

The F.A.M.I.L.I.E.S. Project (Family Assessment, Monitoring of Intervention, and Longitudinal Investigation of Effectiveness Studies) is developing and implementing a comprehensive system of assessing and monitoring the status and progress of families involved in early intervention for a handicapped infant. Through multivariate procedures, it is expected that the joint and interactive contributions of many factors can be evaluated and those which are uniquely predictive of effectiveness can be identified. A related activity which follows is the prescriptive use of family and environment measures to enhance intervention effectiveness for handicapped children and their families carried out in the context of existing delivery systems. The project has three objectives: 1) to document changes in families served by a statewide home visitation program that takes a family approach to helping handicapped infants; 2) to evaluate the effectiveness of intentional changes made in the intervention services; and 3) to design, develop, and implement a computer-based system to monitor intervention services to the families.

The institute's research projects will continue to recruit appropriate samples and collect data. The Fathers Present/Fathers Absent Project will continue to recruit eligible, consecutive, two-parent referrals to the statewide TEACCH program. The Parent-Child Reciprocity Project will continue to recruit Down's syndrome infants (N = 20), non-Down's syndrome handicapped infants (N = 20), and nonhandicapped infants (N = 20). The F.A.M.I.L.L.I.E.S. Project will conduct a second round of data collection in spring of 1984, and PACT team members will then enroll an additional 50 families in the project.

The Fathers Present/Fathers Absent Project will assess two-parent families of handicapped children in their homes before initial evaluation of the child, six months later, and again eight months after the initial evaluation. Comparable families of nonhandicapped children will be evaluated at similar intervals.

In the Parent-Child Reciprocity Project, infants and their parents are assessed four times over 16 months. Subjects enter the study at different, but selected, chronological ages: normally developing infants at age 6 months and handicapped infants at age 10 to 14 months, depending on time of referral.

In the F.A.M.I.L.L.I.E.S. project, at least 200 families and infants are being assessed. A second round of data collection will be conducted six months after the first round of assessments is completed.

The F.A.M.I.L.L.I.E.S. project will also investigate the applicability of using Goal Attainment Scaling (GAS) within the context of home intervention.

RESOURCES AVAILABLE:

The CIREEH I Final Report, CIREEH I and CIREEH II abstracts, Announcement of CIREEH II, and CIREEH II Annual Report for Year 1 are available from the institute. Other available publications are listed in the CIREEH I and CIREEH II abstracts.

Early Childhood Research Institute

ADDRESS: University of Pittsburgh
201 DeSoto Street
Pittsburgh, Pennsylvania 15203

PHONE: (412) 624-2012

FISCAL AGENCY: University of Pittsburgh

PRINCIPAL INVESTIGATOR: Phillip S. Strain

ASSISTANT DIRECTORS/COORDINATORS: Steven R. Lyon, Samuel L. Odom, Diane M. Sainato, Stephen E. Breuning, Linda K. Cordisco, and Howard Goldstein

MAJOR OBJECTIVES:

- To develop procedures for assessing and teaching social and related skills to severely handicapped preschool children so they may participate successfully in instructional settings with nonhandicapped or less handicapped children.
- To develop treatment procedures which will produce child behavior gains in the areas of social interaction, language development, independent work and play skills, and the elimination of disruptive behavior.
- To develop training procedures to produce gains in parenting skills.
- To validate treatment gains by assessing if severely handicapped children who receive these treatments in the context of a preschool classroom will be placed in less restrictive environments than will be similar children who participate in other preschool programs. The experimental and comparison groups of preschool children will be assessed and compared: a) during their preschool years, to compare child progress; b) following placement in public schools, to compare follow-up progress and the restrictiveness of placement; and c) in the home (during and after preschool treatment), to assess changes in family stress, insularity from the community, and depression as functions of treatment.

MAJOR ACTIVITIES:

The following are specific research activities for the institute's first two years; the institute will test and refine treatment procedures in each of the five skill areas:

- Identification of social skill curriculum targets for severely handicapped children in mainstream preschools.
- Social interactions of handicapped preschoolers in developmentally integrated and segregated settings: a study of generalization effects.
- Peer initiation interventions for increasing social interaction of handicapped preschoolers.
- Social behavior patterns of nonhandicapped and nonhandicapped-developmentally disabled pairs of friends in mainstream preschools.
- Reliability and stability of peer ratings for preschool children.
- Effects of peer-mediated interventions on the confederates: a cross study analysis.
- Using single and multiple confederates in peer-initiation interventions.
- Combining teacher antecedent and peer responses for promoting social interaction of autistic preschoolers: a comparison with peer-initiation interventions.
- Effects of sociodramatic play training on social and communicative interaction.
- Promoting generalization and observational learning during language intervention with preschoolers.

- A strategy for determining the appropriate language training approach for minimally verbal, mentally retarded individuals: a preliminary report.
- An alternating treatments comparison of traditional speech therapy and total communication training with minimally verbal, mentally retarded children.
- Peer-mediated interventions to enhance communication among normally developing and handicapped preschoolers.
- Communicative interaction among normally developing and handicapped children.
- Generalization of parenting skills across instructional settings using a trained parent as instructor.
- Assessing generalization of parent training across behaviors and instructional settings.
- The use of a "training to generalize" procedure for facilitating setting generalization in parents of handicapped preschoolers.
- A descriptive analysis of the requirements for independent performance in special and regular preschool environments.
- The effects of a group responding precedure on teacher and child behavior during group circle time.
- The effects of correspondence training on the independent work behaviors of autistic-like preschool children.
- Behavioral treatment of self-injury.
- Efficacy of medication in treating self-injurious behavior.
- The effects of a token program and visual screening during drug withdrawal and alone in treating aggressive behavior.
- Development of a standardized stereotypy rating scale.
- Development of a procedure to differentiate stereotypies from drug induced abnormal movements (dyskinesias).

Early Intervention Research Institute

ADDRESS: Exceptional Child Center
Utah State University, UMN 68
Logan, Utah 84322
PHONE: (801) 750-2029

FISCAL AGENCY: Utah State University

PRINCIPAL INVESTIGATORS: Cie Taylor, James Pezzino, and Terrence Glover
CO-DIRECTORS: Glendon Casto and Karl White

MAJOR OBJECTIVES:

- To review the findings of previously conducted research on early intervention to determine what is known, what gaps exist, and where future research should focus, and to update this review annually and integrate the findings from this update with the institute's own ongoing work.
- To conduct an integrated research program (including longitudinal research) focused on important problems and cost effectiveness issues encountered at typical service settings.
- To disseminate information about the institute's findings and products to a broad audience of professionals and families.
- To train graduate students and research assistants in research techniques and effective methods of intervening with preschool handicapped populations.
- To formally evaluate the impact of the institute's findings and products on the field of early intervention.
- To solicit input, criticism, and feedback from a broad constituency (advisory committee members and others) to ensure that the institute's direction and procedures are appropriately focused and are being carried out in a way that will result in the broadest possible impact.

MAJOR ACTIVITIES:

Using meta-analysis techniques, the institute will continue to review and integrate findings from the hundreds of completed research reports concerning early intervention with handicapped children. From this comprehensive integration of existing research, the institute will determine what conclusions can be drawn from ongoing research, what gaps exist, and how conclusions about effectiveness vary across handicapping conditions and types of intervention. The institute will conduct a cost effectiveness study of half-day versus full-day intervention programs for handicapped preschoolers. The study will include a follow-up study of program graduates. An economic analysis of the impact of early intervention (benefits, costs, and program contributions) will also be completed. And, institute researchers will compare the efficacy and cost effectiveness of using professionals versus paraprofessionals to provide speech therapy, occupational therapy, and physical therapy services. A cost benefit follow-up study of the North Carolina Abecedarion Project will be conducted and specific correlates of intervention effectiveness will be identified.

RESOURCES AVAILABLE:

Meta-Analysis Training, Cost Analysis Training, an annotated bibliography of early intervention research studies, and a compendium of assessment instruments are available from the institute.

TADS

Technical Assistance Development System

ADDRESS: 500 NCNB Plaza
Chapel Hill, North Carolina 27514
PHONE: (919) 962-2001

SPECIALNET USER NAME: FPGCENTER

ADMINISTRATIVE/
FISCAL AGENCY: Frank Porter Graham Child Development Center
University of North Carolina at Chapel Hill

DIRECTOR AND PRINCIPAL INVESTIGATOR: Pascal Trohanis

SERVICES:

TADS provides technical assistance to projects of the Handicapped Children's Early Education Program (HCEEP) in the U.S. Department of Education's Office of Special Education Programs (OSEP). In FY 1983-84, TADS serves 82 demonstration projects, 53 outreach projects, 25 state implementation grant (SIG) projects, and three early childhood research institutes.

To meet the needs of its client programs, TADS coordinates technical assistance services through a central staff located at Chapel Hill, North Carolina, and draws on a bank of consultants and other resources throughout the country. TADS and each program's staff jointly assess that program's needs and agree on plans for services designed specifically to address those needs. Technical assistance services may address areas such as program planning, evaluation, curriculum development, services to children, parent involvement, staff development, demonstration and dissemination, continuation funding, and project administration. TADS regularly publishes materials on these subjects. TADS also provides various types of assistance to professionals and agencies and OSEP programs outside of HCEEP.

PRODUCTS AVAILABLE:

Over the past 13 years, TADS has developed many publications as part of its technical assistance services. A complete list of books, monographs, bibliographies, and manuals is available from TADS.

Recent publications include: The Handicapped Children's Early Education Program Directory (1983-84 edition); Benefits of Early Intervention (second edition, 1984); Evaluating Interagency Collaboration (1984); Assessing Child Progress (1984); Planning for Dissemination (1983); Print (1983); Competency-Based Teacher Education (1983); CBAM (1983); Mainstreaming in Early Education (1983); Affecting State Legislation for Handicapped Preschoolers (1983); Six State Collaborative Projects (1983); Analyzing Costs of Services (1982); Interagency Casebook (1982); Curricula for High-Risk and Handicapped Infants (1982); Strategies for Change (1982); Early Childhood Special Education Primer (1981); Planning for a Culturally Sensitive Program (1981); Gathering Information from Parents (1981); Special Education Mandated from Birth (1981); Serving Young Handicapped Children in Rural America (1980); Planning Services for Young Handicapped American Indian and Alaska Native Children (1980); The Young Black Exceptional Child: Providing Programs and Services (1980); Finding and Educating the High-Risk and Handicapped Infant (1980); Program Strategies for Cultural Diversity: Proceedings of the 1980 HCEEP Minority Leadership Workshop (1980); Issues in Neonatal Care (1982); and The Health Care/Education Relationship (1982). TADS, with OSEP, produced A Practical Guide to Institutionalizing Educational Innovations (1981). TADS produced the videotape "Ideas on Change" (1982).

Project List

The Project List includes all 164 HCEEP projects funded during 1983-84. The projects are grouped by type (demonstration, outreach, state implementation grant, early childhood research institutes, technical assistance center) and listed alphabetically according to state and city within each group. The number assigned to each project indicates the page number of the project's abstract in the Directory section. These numbers also represent the projects in the Index.

PROJECT LIST

DEMONSTRATION PROJECTS

1. HUNTSVILLE, ALABAMA
   Madison Area High-Risk Project

2. MESA, ARIZONA
   Project ENRICH

3. TUCSON, ARIZONA
   Project Yaqui

4. JONESBORO, ARKANSAS
   Focus Classroom

5. LITTLE ROCK, ARKANSAS
   DEEP

6. OAKLAND, CALIFORNIA
   Special Family Support Program

7. POMONA, CALIFORNIA
   Neuro-Cognitive Reeducation Program

8. SAN DIEGO, CALIFORNIA
   Linkage: Infant Special Care Center
   and Project Hope

9. SAN DIEGO, CALIFORNIA
   Project IINTACT

10. SAN FRANCISCO, CALIFORNIA
    ISIS

11. DENVER, COLORADO
    The Playschool

12. CHESHIRE, CONNECTICUT
    FIRST

13. WASHINGTON, D.C.
    AID

14. CLEARWATER, FLORIDA
    High School and Preschool
    Partnership Program

15. GAINESVILLE, FLORIDA
    Project STRETCH

16. MOSCOW, IDAHO
    Family Involvement with At-Risk
    and Handicapped Infants

17. CHICAGO, ILLINOIS
    Chicago Intervention Project

18. CHICAGO, ILLINOIS
    Project LETS

19. MACOMB, ILLINOIS
    Project ACTT

20. NORRIS CITY, ILLINOIS
    RIEP

21. BLOOMINGTON, INDIANA
    An Early Childhood Model Program
    for Handicapped Children Residing
    in Rural Environments

22. LAWRENCE, KANSAS
    Lawrence Early Education Program

23. PARSONS, KANSAS
    PREP-EDD

24. WINFIELD, KANSAS
    Interchange: Inter-Reactive Early
    Child to Adult Exchange

25. LEXINGTON, KENTUCKY
    Infant and Parent Training and Early
    Childhood Development Program

26. MACHIAS, MAINE
    Washington County Children's Program

27. POWNAL, MAINE
    Project RURAL

28. BRIGHTON, MASSACHUSETTS
    Project PACT

29. CANTON, MASSACHUSETTS
    Pathways for Children

30. DEDHAM, MASSACHUSETTS
    ERIN Bilingual Demonstration Project

31. JAMAICA PLAIN, MASSACHUSETTS
    Infant-Toddler Demonstration Project

32. DETROIT, MICHIGAN
    Detroit's Preschool Hearing-Impaired
    Support Center

33. WOODHAVEN, MICHIGAN
    TRIP

34. MENDOTA HEIGHTS, MINNESOTA
    Project Dakota

35. MOORHEAD, MINNESOTA
    Clay County Coordinated Preschool Program

36. PHILADELPHIA, MISSISSIPPI
    Choctaw Handicapped Children's
    Early Education

37. COLUMBIA, MISSOURI
    Project LINCS

38. BROWNING, MONTANA
    Blackfeet Rural Early Education Model

39. OMAHA, NEBRASKA
    Early Referral and Follow-up

40. EDISON, NEW JERSEY
COPING

41. JERSEY CITY, NEW JERSEY
PEACH

42. NEW BRUNSWICK, NEW JERSEY
Language Interaction Intervention Project

43. BERNALILLO, NEW MEXICO
PIPE Project

44. ESPANOLA, NEW MEXICO
A Continuum of Services in Rural Northern New Mexico

45. SANTA FE, NEW MEXICO
New Vistas Program for Infants with Special Needs

46. GARDEN CITY, NEW YORK
Project VIVA

47. SYRACUSE, NEW YORK
Creating Least Restrictive Options

48. MORGANTON, NORTH CAROLINA
Project SUNRISE

49. RALEIGH, NORTH CAROLINA
First Years Together

50. WILLIAMSTON, NORTH CAROLINA
VIPP

51. AKRON, OHIO
A Social Communicative Intervention Model

52. CANTON, OHIO
TEACH Project

53. PAINESVILLE, OHIO
Branching Out

54. CORVALLIS, OREGON
Old Mill School and Linn-Benton Community College Project

55. MONMOUTH, OREGON
En Trans

56. ALLENTOWN, PENNSYLVANIA
Project HAPPY

57. GIBSONIA, PENNSYLVANIA
Rural KIDS Project

58. PITTSBURGH, PENNSYLVANIA
Learning Experiences

59. PITTSBURGH, PENNSYLVANIA
PATT Project

60. PITTSBURGH, PENNSYLVANIA
Project Prep

61. SCRANTON, PENNSYLVANIA
Neonate At Risk Project

62. HATO REY, PUERTO RICO
Demonstration Project for Visually Impaired Preschoolers

63. PROVIDENCE, RHODE ISLAND
Project Child

64. LENOIR CITY, TENNESSEE
Little Tennessee Valley Education Cooperative Birth-Thru-Three Program

65. NASHVILLE, TENNESSEE
Cognitive Education for Preschool Handicapped Children

66. NASHVILLE, TENNESSEE
Optimal Learning Environments for Handicapped Infants

67. HOUSTON, TEXAS
Project TOTAL

68. ST. CROIX, U.S. VIRGIN ISLANDS
Early Childhood Special Education Project

69. LOGAN, UTAH
Social Integration Project

70. OGDEN, UTAH
INSITE

71. OGDEN, UTAH
SPECTRM

72. MIDDLEBURY, VERMONT
RIFE

73. PETERSBURG, VIRGINIA
TIMMI

74. SUFFOLK, VIRGINIA
Project Cope

75. WILLIAMSBURG, VIRGINIA
Bright Beginnings

76. MOSES LAKE, WASHINGTON
Umbrella for Families

77. SEATTLE, WASHINGTON
CAP Project

78. SEATTLE, WASHINGTON
SEFAM

79. CLARKSBURG, WEST VIRGINIA
Project PEPSI

80. MADISON, WISCONSIN
Active Decision Making by Parents

81. MILWAUKEE, WISCONSIN
Project SPICE

82. POWELL, WYOMING
Special Touch Preschool

OUTREACH PROJECTS

83. PAGO PAGO, AMERICAN SAMOA
Samoa's Cooperative Outreach Project

84. LOS ANGELES, CALIFORNIA
PASIT

85. LOS ANGELES, CALIFORNIA
UCLA Intervention Program

86. OAKLAND, CALIFORNIA
ICN Interact Project

87. ROHNERT PARK, CALIFORNIA
SPEED

88. SAN FRANCISCO, CALIFORNIA
Project MORE

89. BOULDER, COLORADO
INREAL/Outreach

90. WASHINGTON, D.C.
Project UPSTART

91. ATHENS, GEORGIA
Rutland Center Developmental Therapy
Model Outreach Project

92. MOSCOW, IDAHO
Idaho Outreach

93. CHAMPAIGN, ILLINOIS
PEECH

94. CHAMPAIGN, ILLINOIS
RAPYHT

95. MACOMB, ILLINOIS
Macomb 0-3 Regional Project

96. PEORIA, ILLINOIS
Peoria 0-3 Outreach Project

97. ROCKFORD, ILLINOIS
Project RHISE/Outreach

98. MARSHALLTOWN, IOWA
Project FINIS Outreach

99. MURRAY, KENTUCKY
PEEEC

100. NEW ORLEANS, LOUISIANA
Outreach: Louisiana Curriculum
for Infants with Handicaps

101. MACHIAS, MAINE
Washington County Children's Program

102. BOSTON, MASSACHUSETTS
Project WELCOME Outreach

103. BRIGHTON, MASSACHUSETTS
Project Optimus/Outreach

104. DEDHAM, MASSACHUSETTS
ERIN Outreach Program

105. NEWTONVILLE, MASSACHUSETTS
Project Outreach U.S.A.

106. DETROIT, MICHIGAN
Preschool Pupil/Parent/Professional
Outreach Project

107. YPSILANTI, MICHIGAN
High/Scope First Chance Outreach Project

108. JACKSON, MISSISSIPPI
Early Education Center Outreach Project

109. OXFORD, MISSISSIPPI
Project RUN/Outreach

110. MISSOULA, MONTANA
Big Sky Progressive Development
Rural Outreach Project

111. ALBUQUERQUE, NEW MEXICO
Albuquerque Integration Outreach Project

112. NEW YORK, NEW YORK
FEED

113. WANTAGH, NEW YORK
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